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ABSTRACT

This guidebook highlights important components involved in establishing and monitoring a successful workplace education program (WEP). Chapter 1, Workplace Education, addresses the changing educational workplace; recognizing need for workplace education; and a new educational model for workplace learning that focuses on integration of basic academic skills with technical skills used on the job. Chapter 2, The Partnership Team, outlines and describes roles and benefits of key partners and forming the team. Chapter 3, The Needs Assessment Process, discusses types, management and worker perspectives, data gathering, tools, conducting the needs assessment, and data analysis. Chapter 4, Goals and Strategies, considers setting workplace goals and strategies and creating a positive learning environment. Chapter 5, Curriculum Design, outlines basic principles and concepts important in designing a workplace education curriculum. Chapter 6, Marketing the Program, lists ways to advertise the program, incentives for worker participation, and awards. Chapter 7, The Evaluation Process, looks at two types of evaluation data, people responsible for the evaluation, issues to evaluate, evaluation instruments, analyzing and interpreting collected data, and reporting results. Chapter 8, Staff Development, offers suggestions for topics and procedures. An addendum, amounting to over one-half of the guide, contains sample forms and examples corresponding to each chapter/topic. (YLB)

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ED 426 280

PRINCIPLES AND GUIDELINES TO DESIGN AND IMPLEMENT A WORKPLACE EDUCATION PROGRAM

Massachusetts Career Development Institute

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Geriatric Authority of Holyoke

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UNITED STATES DEPARTMENT OF EDUCATION

NATIONAL WORKPLACE LITERACY PROGRAM

PRINCIPLES AND GUIDELINES TO DESIGN AND IMPLEMENT A WORKPLACE EDUCATION PROGRAM

Submitted by

THE MASSACHUSETTS CAREER DEVELOPMENT INSTITUTE, INC.

In Partnership with

GERIATRIC AUTHORITY OF HOLYOKE, MASSACHUSETTS

UNITED FOOD AND COMMERCIAL WORKERS UNION

LOCAL 1459

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9. ADDENDUM 57

The addendum contains samples and practical examples on how to apply the guidelines presented in chapters one through eight.

WORKPLACE EDUCATION

THE CHANGING EDUCATIONAL WORKPLACE

Changes are taking place in the modern workplace that are as drastic as those which occurred during the agricultural and industrial revolutions. At that time, many farmers left their land to become industrial workers. In today's society, workers are facing new changes brought about by another revolution, a dramatic increase in the use of technology. Technology has changed the nature of work and, consequently, places more demands on workers. The employee must perform tasks requiring higher levels of reading, writing, mathematics, problem solving, communication, English for Speakers of Other Languages (ESOL), and other basic skills. Lack of basic skills creates obstacles to progress in the workplace; consequently, it is necessary to improve the worker's ability to function in that environment.

Businesses, health care facilities, and industries recognize that their greatest assets are their employees. To ensure greater efficiency and continuous improvement among employees, workers must be given new tools to improve their participation and partnership in the workplace. Employees need to understand thoroughly the significance of their individual and collective contributions to workplace success.

An important component to improved job performance is education. For businesses to succeed in a highly competitive market, they must invest in the continuous education of their employees. One way to face this challenge is to establish Workplace Education Programs.

RECOGNIZING THE NEED FOR WORKPLACE EDUCATION

There are many indicators within an industry that signal the need for an education program. Changes in the demographics of workers, new styles of management techniques, the creation of new jobs, the elimination of old ones, down sizing, and the introduction of new, sophisticated, computerized machinery contribute to the complexities of the modern work world. In spite of all the signposts for further education, both employer and employee must recognize the need and want to proceed toward achieving the end objective.

When employees lack incentives to improve or to participate in new approaches to doing business, work quality is compromised, and immediately or eventually the bottom line profit is affected. With the introduction of Continuous Quality Improvement (CQI) and Statistical Process Control (SPC) which require higher level language and math skills, some workers become even more stressful. Under stress, workers do not speak confidently, ask questions enthusiastically, express ideas, or follow directions precisely. Their self-esteem weakens. Some employees lack the initiative or the ability to solve problems. Workers are afraid to apply for job upgrades or don't sign up for courses that might prepare them for job advancement.

Other day-to-day signs that reveal the need for education include poor customer services, careless business writing, unprofessional telephone techniques, and poor oral and written communication. Accidents occur frequently and there is a high rate of worker turnover. Education in the workplace is one of the most pressing issues confronting and confounding industry and labor.

WORKPLACE EDUCATION

is an on-site,

customized educational program

designed to assist EMPLOYERS AND EMPLOYEES

to enhance and integrate

basic skills and technology

in order to function

more successfully

on the job.

NEW EDUCATIONAL MODEL FOR WORKPLACE LEARNING

Education in the workplace differs from the traditional school-based model. In the workplace educational model, the physical structure of the educational experience changes from school-based to work-based. The workplace becomes the new learning environment. Education takes place on the job where people spend most of their time. The focus of this workplace educational model is to integrate basic academic skills with the technical skills workers use on the job.

Basic skills refer to a broad range of abilities necessary to function well in the workplace. An educational curriculum is integrated with job-related materials workers actually use in the workplace. Basic skills are taught within the context of job performance. To achieve this end, learning materials need to be custom-designed to fit the actual work requirements and situations unique to each worksite. Employees may need to upgrade the basic skills they use in the workplace in order to perform their jobs more effectively.

The fundamental purpose of workplace education is to unleash the expertise and resources of employees, while challenging them to learn new technology skills. New approaches to technology won't work unless employers invest in continuous education and training. (Addendum pages 47-51)

Human capital is the nation's greatest asset and resource.
The future of economic and productive strength
lies with the education of its employees.

THE PARTNERSHIP

TEAM

KEY PARTNERS IN WORKPLACE EDUCATION

There are a number of people needed to form a partnership for the purpose of developing a comprehensive workplace education program. The key partners include: managers (employers), educators, union officials and employees (learners). Because no one person or group can do the task alone, collaboration among these partners is absolutely essential if a workplace education program is to succeed.

The following pages outline and describe the roles and benefits of persons involved in the partnership. The success of the program is contingent upon the knowledge partners have of their roles and the roles of other members. While the responsibilities and contributions of persons vary from site to site, an active and on-going commitment from everyone is essential. All partners share equal responsibility for the program's development and success.

1. ROLE OF MANAGEMENT

A. Provides an adequate, comfortable environment for learning.
B. Assures a realistic time schedule for instruction.
C. Supports the program and participants.
D. Helps assess workplace needs and targets skills to be taught.
E. Shares knowledge of workplace goals and desired outcomes.
F. Identifies work-related materials for use in instruction.
G. Assists with publicizing program and recruiting participants.
H. Provides incentives to encourage worker participation.
I. Assists with program implementation.
J. Makes use of skills employees learn.
K. Identifies skills needed for career advancement and job security.

BENEFITS TO MANAGEMENT

A. Results in a more competitive, productive, efficient, and constructive worker.
B. Reduces job loss, absenteeism, and job retention problems.
C. Helps strengthen job satisfaction and greater organizational pride.
D. Increases workers' capacity to perform a wider range of job tasks.
E. Promotes, within the broader community, a positive image of the workplace.
F. Improves safety practices, thus reducing liability and health insurance claims.

2. ROLE OF EDUCATORS

A. Establishes the relevance of education within the workplace.
B. Offers necessary expertise in academic design and instruction.
C. Constructs competency-based, learner assessment instruments.
D. Assists in assessing workers' educational needs.
E. Develops individual educational plans (I.E.P).
F. Creates and customizes workplace-specific curricula and instructional materials.
G. Provides qualified instructors.
H. Helps publicize program and recruit participants.
I. Provides educational materials and equipment.
J. Evaluates progress of each learner and provides feedback.
K. Modifies and improves program to ensure greater benefits.
L. Designs program evaluation tools.
M. Ensures the continuation of educational programs by training key employees to carry on the program.

BENEFITS TO EDUCATORS

A. Identifies a new group of people to educate and train.
B. Increases the relevance of education in industry.
C. Expands the scope of educational and training opportunities within the community.
D. Helps industry, business, and health care facilities reduce costs of independent training consultants.
E. Enables educators to become co-learners with workplace learners by sharing experience, knowledge, and motivation.

The rate of return for education is comparable to the rate of investment in equipment.

3. ROLE OF UNION OFFICIALS

A. Represents the best interests of employees.
B. Understands changes that occur in the workplace.
C. Brings credibility to the program.
D. Fosters the belief that what is good for the worker is good for the employer.
E. Endorses the program to ensure greater membership participation.
F. Participates in evaluating workers' satisfaction with the program.

BENEFITS TO UNION OFFICIALS

A. Strengthens relations with management.
B. Increases understanding of workers' educational needs and other kinds of supportive services.
C. Co-operates in a program that supports union members.

4. ROLE OF WORKERS-LEARNERS

A. Accepts connection between education and employment.
B. Commits to new learning opportunities.
C. Participates in assessing and planning the educational program.
D. Promotes program participation among peers.
E. Provides specific job information to educators.
F. Connects with union officials regarding supportive services while in training.

BENEFITS TO WORKERS-LEARNERS

A. Increases self-esteem and self-confidence
B. Learns a variety of new and transferable job skills.
C. Enhances job security.
D. Diminishes chance of job layoff because of educational deficiencies.
E. Improves opportunities for job promotion and career advancement.
F. Strengthens adaptability to new technology.
G. Generates greater job satisfaction and quality of work life.

FORMING THE PARTNERSHIP TEAM

The establishment of a partnership in a workplace education program may be initiated in many ways. Two more common approaches are:

1. An educational provider with the necessary staff, expertise, capital, and flexibility may design and market a program for various business clients interested in forming a workplace learning program.
2. Employers desiring to upgrade and provide skills enhancement for their employees may informally seek the services of an educational provider or submit a formal request for proposal (RFP) to establish a workplace education program.

In some instances, business and educational agencies form a partnership because of previously established experiences and relationships. Within this relationship, they may naturally begin a straight-forward dialogue about their respective roles in developing an educational program. In any case, the business must make sure that the educational partner with whom collaboration is established has the capacity to provide services specific to the work culture and employees' needs.

No matter who assumes the initial lead in sponsoring a program, the commitment among all partners is basic. The collaborators: employers, workers, union officials, and educators meet to form a Partnership Team whose principal functions are to assess, implement, manage, and evaluate the program according to the terms established by the members. The title of the team varies: steering committee,

planning team, advisory board, or life-long learning task force. The term Partnership Team is used throughout this book.

A monthly agenda is planned for each meeting that includes some of the following general issues:

- Participatory approach to program development.
- Program objectives and desired outcomes.
- Team member responsibilities.
- Needs assessment analysis.
- Program implementation.
- Criteria for recruiting learners.
- Program publication.
- Incentives, rewards and recognition for employee participants.
- Learning space, schedule, release time, and supplies.
- Ongoing search to address new educational needs.
- Program evaluation.

A team co-ordinator is chosen to keep the many team players and projects functioning as a whole. (Addendum pages 52-58)

PARTNERSHIP TEAMS...

Set policy and direction,
relate educational goals to corporate goals,
assist with curriculum development,
make program revisions, and
evaluate objectives and outcomes.

THE NEEDS ASSESSMENT PROCESS

THE NEEDS ASSESSMENT PROCESS

The term, assessment, refers to the process used to analyze workers' proficiency. The needs assessment is a tool that determines gaps between job performance and what the job requires.

The first step in doing a needs assessment is to understand its purpose and how it will be utilized. The purpose of a needs assessment is to identify the goals of both managers and workers, the factors that inhibit or support these goals, and the situations that exist or don't exist to achieve them. The information obtained from a needs assessment is the primary tool used by the partnership team to design educational programs that specifically address these issues.

TYPES OF NEEDS ASSESSMENT

One type of needs assessment is a formal procedure conducted by outside educational consultants and experts. Although most people are familiar with this type of academic assessment, it is not always geared to tasks found in the workplace. The more frequently used method of assessment is the one performed internally through the collaborative efforts of management, educators, union officials, and workers. This method is more conducive to workplace facilities because the assessment taps the expertise of both workers and managers in order to provide valuable information from a number of perspectives.

MANAGEMENT PERSPECTIVES

Management is concerned about organizational problems, decision making

processes, and the performance and potential of workers. Additional concerns and perspectives from a management level are:

- Organizational needs and achievements in terms of productivity.
- Quality of work life for employees.
- Factors that block or support progress.
- Steps needed to overcome obstacles and build on strengths.

WORKER PERSPECTIVES

Workers possess significant knowledge about the specific requirements inherent in job tasks, the proficiency needed to perform them well, and the methodologies and environment in which these skills are applied. Data obtained from the workers' perspective include:

- Situations in which employees are called on to use basic skills.
- Problems employees confront and how they affect the quality of work.
- Materials or work samples that could be incorporated into learning experiences.

Adult basic educators, company officials, union representatives, and workers can collaborate effectively in conducting a workplace needs assessment.

DATA GATHERING

Before conducting the actual needs assessment, preliminary information should be made available. Information should include: data about the company, its products, its organizational structure, types of present in-house training, industry trends, technological changes, types of equipment, written job-related materials, and possible barriers to learning. There should also be a familiarity with the physical structure of the facility.

ASSESSMENT TOOLS

A number of tools are used to obtain information during the assessment process. They range from the highly sophisticated to the more common types. The tool or tools used depend on the type of information sought and the scope of training needed. Generally, needs assessment tools seek to gather information from two general categories:

1. Information that refers to the WORK itself: duties, functions, level of difficulty, and quality standards required.
2. Information about the WORKER: skills that workers possess or need to possess to perform the tasks efficiently.

Below are some of the tools used during a needs assessment:

QUESTIONNAIRE - printed form that contains pertinent questions.

OBSERVATION - data obtained by careful awareness, attention, or notice.

INTERVIEWING - conversations with individuals or groups to gather facts.

REPORTS - detailed accounts of proceedings, transactions, or events.

POLICIES - guiding principles or procedures intended to influence decisions.

JOB EVALUATION - appraisal of worker's job performance.

CHECKLISTS - list of items to be noted, checked, or remembered.

OPEN-ENDED QUESTIONS - questions that elicit a response in the person's own words.

JOB DESCRIPTION - a summary of job responsibilities and qualifications.

JOB TASK ANALYSIS	- job tasks broken down and linked to skills needed to perform them well.
JOB SHADOWING	- an employee is followed by someone who wishes to learn skills required on the job.
TECHNICAL CONFERENCES	- groups formed to discuss, clarify, and define productivity problems and technical difficulty of work.
BASIC SKILLS ANALYSIS	- a study of test results that measures one's ability to function in the workplace.
COMPETENCY	- test designed to measure performance or degree of proficiency on a particular task.
BRAINSTORMING	- process used to elicit sudden ideas or plans to solve problems.
MATERIALS REVIEW	- collection of materials workers are required to read or write on on the job.
ACADEMIC TESTS	- tests used to determine workers' basic skills levels.

CONDUCTING THE NEEDS ASSESSMENT

Once the assessment tools are identified and written, the next step is to implement them. Various members of the partnership team (employers, workers, and educators or other designated personnel) conduct and implement various parts of the needs assessment, depending on each person's expertise.

Employers are responsible for creating a positive environment to conduct the needs assessment. The physical structure where the assessment takes place should be well-lighted, private, clean, and spacious. Management should prepare and inform workers about the assessment process, its purpose, and potential benefits to both themselves and the company. The manner in which an assessment is presented to employees

often determines levels of co-operation and success. Supervisors schedule the assessment during less busy times and when employees are more likely to be available.

Educators usually administer basic skills assessment tools, since they are the ones most familiar with the procedures of integrating educational activities with job task performance. Teachers are aware of reading comprehension levels, English language proficiency, verbal/written communication capabilities, mathematics potential, and possible barriers to learning.

It is important that workers are notified and assured that all information obtained through the assessment remains confidential.

DATA ANALYSIS

After the assessment tools are administered and collated, the data are ready to be analyzed and interpreted. The outcome of the analysis depends, to a great extent, on the quality, objectivity, and accuracy of the data collected.

Some assessment outcomes identified by business leaders and endorsed by the U. S. Department of Labor include the following skills:

- **COMMUNICATION** - vocabulary, grammar, comprehension, writing, speaking, listening, reading.

- **COMPUTATION** - whole numbers, fractions, decimals, percents, ratios, direct measurement, computed measurements, and interpretation.

- **REFERENCING INFORMATION** - use of manual/materials for quick reference, where to look for answers, or how to use available information to answer questions.
- **PROBLEM SOLVING AND CRITICAL THINKING** - ability to solve problems effectively and quickly.
- **FUNCTIONING EFFECTIVELY IN THE WORKPLACE** - interests, safety, values, and attitudes expected for competence and productivity on the job.

> ***The National Literacy Act of 1991 describes literacy as: "an ability to read, write, and speak in English, and compute and solve problems at levels of proficiency necessary to function on the job and in society, to achieve one's goals, and develop one's knowledge and potential."***
> ***(P.L. 102-73)***

The significance of the needs assessment and subsequent analysis process is important because it connects all components of the workplace education program from beginning to end. From the data analysis, the partnership team establishes educational goals and strategies. These goals are subsequently used to design a comprehensive program curriculum and to determine whether the program is succeeding or if changes need to be made. In the light of these facts, the needs assessment and analysis are NOT options, they are obligations.

(Addendum pages 59-77)

WORKPLACE EDUCATION

GOALS AND STRATEGIES

SETTING WORKPLACE GOALS AND STRATEGIES

By definition, a goal is something to be achieved or accomplished. Goals are guidelines to measure the continuous progress of the program. They are also used as measuring instruments for the program.

A goal is really a need in reverse. A need is something necessary or desired that is missing or wanting by both employer and employee. What is important to remember about goals in a workplace education program is that they must be stated in job-related terms rather than in educational terms. Basic skills like English grammar, math, and reading comprehension are integrated into the job-related goals. Below are some sample job-related goals:

- to increase employee self-confidence, self-esteem.
- to increase team work or independent work.
- to improve safety habits and reduce accidents.
- to increase use of the English language among non-English speaking employees.
- to develop a greater appreciation of cultural differences in order to reduce conflicts.
- to increase worker job retention and decrease absenteeism.
- to train in the use of new machinery or products.
- to improve customer relations

Once goals are stated, strategies are developed for their implementation. A strategy is a practical plan of action to help achieve the goal. Below is an example of a goal and some related strategies:

GOAL - To increase the use of the English language among non-English speaking employees.

STRATEGY A - To designate employees to receive one-on-one tutoring in English, two hours per week for a period of 15 weeks.

STRATEGY B - To pre-test learners by an English Speakers of Other Languages (ESOL) instructor to determine level of English proficiency.

STRATEGY C - To identify materials to be used in class that consist of vocabulary words from the company's safety manual, information memos, product forms, and other job-related materials used daily on the job.

Once goals and strategies are identified, they need to be prioritized. The primary goal is the one that is most important. A good place to start in prioritizing goals is to identify the following:

1. job skills most in need of improvement.
2. lack of job skills that interfere with the efficiency of daily work.
3. work situations most in need of being addressed.

An important component of establishing overall goals is to link the goals of the company with the goals of participating employees. This concept integrates and provides support for the education program at all levels of the company.

CREATING A POSITIVE LEARNING ENVIRONMENT

Many components contribute to a positive learning environment. Among them are a comfortable learning setting and a realistic learning time schedule. The physical learning space should be well-lighted, quiet, and equipped with applicable job-related materials, texts, pictures, and audio visuals. The learning environment is the home of the education program and reflects whether the program is taken seriously. The time schedule should be convenient for workers to attend without jeopardizing their work responsibilities. Regularity of classes should be maintained to provide consistency to the learning process.

Another element of a good education program is respect for employees as adult learners. Many adults have been away from education so long that they have forgotten what is required to learn new skills. Adult learners may have had a number of unsuccessful educational experiences. Many workers will resist the program because they are embarrassed to admit they have limitations. Avoid referring to the program as literacy skills. This is demeaning and speaks of deficiencies. Use terms like skills development, lifelong learning, or technology training. Learners must be approached as equals in a collaborative process in which everyone, including the instructor, is a co-learner.

For an educational program to be successful, it needs support also from mid-management and supervisory levels. Supervisors are responsible for getting the daily work done and might view an educational program as interfering with production. Supervisors who participate fully in the educational process will make a difference both in employees' participation and their resultant achievements.

(Addendum pages 78-79)

CURRICULUM DESIGN

CURRICULUM DESIGN, PRINCIPLES AND CONCEPTS

Curriculum is a plan with goals and objectives that include an outline, lessons, teaching methods, description of task procedures, tests to measure competency, and other related materials to form a course of study.

The following paragraphs outline some basic principles and concepts that are important in designing a workplace education curriculum.

1. The partnership team establishes goals and strategies from the data obtained in the Needs Assessment. The curriculum objectives flow from those goals and strategies. Objectives contain measurable competencies and a description of how they can be achieved. An example follows:

   GOAL To increase the use of the English language among non-English speaking employees.

   OBJECTIVE Given instruction in safety vocabulary, learners will demonstrate an ability to read orally 25 different safety signs used on the job, with an accuracy of 100%.

   STRATEGY Non-English speaking employees will be provided with audio tapes of safety words in English.

2. Curriculum must be worker-centered to include basic skills as they are used on the job. Targeting job-related skills, problems, and workplace concerns illustrate the relevance between education and job development. Workers are more motivated and learn faster when basic skills are applied to their work.

3. Combine basic skills with critical thinking and problem solving. The success of the curriculum is determined by whether the worker can apply and effectively use the skills on the job.

> *Workplace education instruction involves group-based and one-on-one instruction as it relates to the work or the activities individual workers regularly perform on the job.*

4. The curriculum must be adaptable to facilitate learning and accommodate different proficiency levels.

5. The curriculum should be written using a format that measures the workers' ability or competency to apply basic skills within a specific job task that meets measurable standards. The structure best suited to achieve this purpose is a competency-based curriculum. Six curriculum terms most suitable for a competency-based curriculum structure are:

A. COMPETENCY TITLE AND HOURS	Competency means skillful. Hours specify the average time it takes to accomplish the task. Competency is also called skill, task, and learning activity.
B. PERFORMANCE OBJECTIVE	The objective identifies the task the learner must perform and how the task is measured or evaluated.
C. COMPETENCY ANALYSIS	A competency analysis, also called job inventory, is a step-by-step description of how to perform the task or skills.

D. METHODOLOGY	This states the methods used to achieve the task as specified in the performance objective.
E. RESOURCES	Resources are the specific tools, equipment, textbooks, materials, audio visuals, etc. needed to perform the task or competency.
F. COMPETENCY EVALUATION	This is an activity that measures how well the task is performed; also called competency test or product evaluation.

6. Job-related materials serve as instructional texts. Although traditional, commercial, educational materials are used, they are limited because they do not apply to what workers need to learn and are not specifically applicable to the workplace. Workers need materials that are relevant to the workplace. The curriculum, therefore, must be tailored to meet the explicit needs of employers and employees. Some examples of job-related materials are:

   readings, safety charts, machine manuals, company manual excerpts, job-related vocabulary, technical terminology, forms, communications, signs, company policies, job descriptions, maps, job orders, production tickets, quality standards, union contracts, insurance guidelines, technical terminology, photography, videos, employee-generated materials, and aids used on the job.

7. Curriculum is an on-going process in which the expertise of everyone is necessary. Supervisors have knowledge of tasks as they relate to the job. Educators are adept at selecting or writing educational materials. To integrate these two, it may be helpful for educators to "job shadow" employees while they perform their work, in order to become familiar with skills used on the job.

8. Curriculum drafts may be produced by instructors with the assistance of company supervisors. Drafts are presented to and reviewed by the partnership team for constructive feedback. The curriculum is then piloted and implemented before a final version is produced.

Not everyone is qualified to write curriculum.
The educational agency with experience in curriculum development may have to supervise the process.

9. Time is an important factor in curriculum development. Curriculum writing is time consuming. It may take as long as one year to write and organize a good curriculum. The task is an on-going process because curriculum often needs to be modified and up-dated.

After identifying goals, establishing partnerships, determining teaching strategies, and designing curriculum, the next step is to examine ways to market the program to encourage the larger population of workers. (Addendum pages 80-93)

MARKETING THE PROGRAM

MARKETING THE PROGRAM

Getting workers to participate in a workplace education program is a real challenge. Many workers are embarrassed to admit they have basic skills limitations. Consequently, a number of strategies are necessary to promote and market workplace education. One marketing strategy is to ensure consistent, positive communication to support the program. Another is to treat education as an extension of existing training programs. Advertise the educational program in the same manner as other training programs. The message must be loud and clear that the company values its workers. Learners must also be made aware of the purpose of training and its expected outcomes.

> ***The success of the program may depend on how it is advertised to learners.***

Advertising a program involves many tasks: developing advertising materials, circulating and distributing the materials, and following up potential enrollments. The next section lists a variety of ways to advertise the program.

DEVELOPING ADVERTISING MATERIALS

The more popular types of written advertisements are brochures, posters, flyers, newsletters, personal invitations, union communications, and special mailings.

Brochures should be colorful, with spacing and layout which are pleasing to the eye. Writing must be straightforward, clear and meaningful to the reader. If applicable, bi-lingual materials are most helpful. Be sure brochures include an application form for workers to enroll in classes.

Materials may be distributed or displayed in prominent locations throughout the facility, on tables near main entrances, in workers' paychecks, on bulletin boards throughout the workplace including the cafeteria. So that everyone is made aware of what is happening, circulate information on consecutive days and between working shifts. Unions might furnish a letter encouraging participation.

Oral presentations about the program allow workers to ask questions. Sponsor educational fairs. Have an open house in areas in which the program is located. Offer a door prize at such events. Communicate informally during coffee breaks and lunch times. Sponsor brown bag workshops. Produce a video tape about the program. Have individual departments meet and discuss workplace learning.

Give visibility and presence to instructors by inviting them to management, union, and employee meetings. Ask community leaders or other role models to promote the program. Introduce the program to new employees during orientation. Create support on all levels.

Motivated learners are the best learners.

INCENTIVES FOR WORKER PARTICIPATION

Workers need incentives that encourage participation. Incentives need not be costly or elaborate. Consider some of the following:

- paid release time
- tuition reimbursement
- opportunity for new job paths
- promotion or advancement
- letter of achievement in personnel file
- certificates and graduation ceremonies

AWARDS

Workers like to feel valued and appreciated. During and upon completion of an education program, workers should be recognized for their achievements. Ways in which this might be done include bonuses for completion of the program, T-shirt with special logos, and an employee recognition banquet in which the CEO presents certificates, awards, or pins. It is important to create high visibility for participants and their successes. (Addendum pages 94-99)

THE EVALUATION PROCESS

THE EVALUATION PROCESS

A partnership team that invests time and personnel into an education program consistently asks questions about the effectiveness of its efforts. Questions arise: Does the program meet its objectives? Does the program improve job performance, productivity and basic skills acquisition? If so, how and in what way? Is the program worthwhile to participants? Do they enjoy it? What are the implications of new skills training for the future of the facility and its employees? To answer these and other similar questions, an evaluation process is essential.

Every workplace education program should be evaluated. The process should be short and simple. The first step in the evaluation process is to develop a plan that contains specific strategies on how it is conducted: identify people responsible for the evaluation process, determine issues that need to be evaluated, select appropriate methods and tools to collect the data, analyze and interpret data collected, and report the results of the evaluation. All these strategies should be discussed and planned with the partnership team BEFORE the evaluation is begun.

The main purpose of an evaluation is to obtain reliable and meaningful data that measure whether the program is meeting the goals and objectives. During the training, there are many informal signs that indicate whether program goals are being met. For example, instructors continually evaluate learners' performance and supervisors notice improvement in work quality or production. However, what is needed is a more effective, systematic method of collecting, organizing, and analyzing data for the

purpose of measuring the impact of the program. Baseline data are necessary to show how things were at the beginning of the program so that it may be compared with results obtained after training is completed.

TWO TYPES OF EVALUATION DATA

There are two types of data gathered for evaluation purposes, formative data and summative data. The formative type is the monitoring process which determines how things are going in the day-to-day management of the program. The benefit of the monitoring process is that it provides information that pinpoints where modifications, adjustments, or changes are necessary while the program is in process. Formative data include some of the following:

- number and frequency of activities
- class attendance
- number of participants and level of participation
- effectiveness of resources
- methods of instruction
- curriculum implementation
- quality of training
- overall management of the program

The summative type provides data to analyze the outcome of what has changed as a result of the program. It provides aggregate information on the overall effectiveness of the program. Summative data are gathered at major intervals: quarterly, semi-annually, or yearly. Summative data include some of the following topics:

- participants' achievements
- ability to apply skills in the job
- improved behavior, attitude and morale of workers
- increased quality and production of work
- improved self-esteem

An effective evaluation organizes both the formative and summative data. The collection of all data is made easy by keeping accurate records. Collect the best, most reliable, and valid data from all involved in the program. Union leaders, instructors, CEOs, and workers are all key to a meaningful evaluation. Because data are needed throughout the program, the total evaluation process starts at the onset of the program and continues to its completion.

IDENTIFY PEOPLE RESPONSIBLE FOR THE EVALUATION

Although many people are involved in the total evaluation process, the services of an outside evaluator may be helpful in setting up a formal evaluation system. For an evaluation to be reliable, the evaluator has to be qualified to perform the task. The evaluator should be brought in at the beginning of the program to work in collaboration with everyone involved in the program to ensure that the data obtained are relevant and useful.

DETERMINE ISSUES TO EVALUATE

The overall process of an evaluation should be conducted in an efficient and timely manner. The structure should be simple. Although the scope and method vary in each worksite, data are usually gathered using the following structural categories:

A. **GOALS/OBJECTIVES** - Find out how acquired skills are applied on the job for improved performance.

B. **PARTICIPANTS** - Compile age, gender, job category, attendance, and progress.

C. **ORGANIZATION/RESOURCES** - Determine how the organization of the program and resources were utilized to coincide with program needs and outcomes.

D. **IMPLEMENTATION** - Determine if the program was implemented as planned and how well it worked.

E. **PROGRAM OUTCOME** - Determine what the program achieved and its relevance and effectiveness after the program ended.

EVALUATION INSTRUMENTS

One of the main factors in the evaluation process is to select the appropriate data gathering instruments. Each instrument is useful for specific purposes and has its own strengths and weaknesses. For this reason, it is more beneficial to use a variety of instruments. Among them are:

A. **LEARNER PERFORMANCE** - This is the main part of an evaluation because it compares pre-and post levels of learners' skills proficiency and competency achievements throughout the program.

B. **LEARNER PORTFOLIO** - The portfolio is a collection of data, papers, and exercises that show workers' activities/progress.

C. **INSTRUCTOR INPUT/RECORDS** - Data from the instructor include records of attendance, level and changes in educational skills, motivation, self-esteem, aptitude, achievements, and paper and pencil testing.
(Standardized tests that measure grade levels of learners are usually inadequate because they have minimal or no relevance to what workers do on the job. Tests should reveal workplace skills competency.)

D. **SUPERVISOR INPUT** - Management personnel are asked to evaluate the impact of the program on employees' job performance.

E. **SELF-EVALUATION** - Learners assess their own abilities to achieve objectives.

F. **INTERVIEWS** - Data are gathered from discussions with learners, instructors, managers, and the partnership team before and after educational training.

G. **FOCUSED GROUPS** - Discussions occur with five to eight people to identify the impact of the program and changes the group would like to see happen.

H. **STRUCTURED OBSERVATION** - This is a tool developed to show how curriculum is translated into action. This instrument is used at the beginning of the program, when it is in full swing, and at the program's completion.

I. **OTHER INSTRUMENTS** - Other tools consist of questionnaires, journals, rating scales, reports, improved products or services, and completion of projects.

ANALYZING AND INTERPRETING COLLECTED DATA

Once the data from the evaluation are organized, they must be analyzed in three modes: A. goals and objectives, B. impact of the program, and C. ways to improve the program.

A. THE EXTENT THAT GOALS AND OBJECTIVES ARE ACHIEVED

The goals and objectives are the blueprint for the evaluation. Analyze how goals were implemented and achieved, the type and level of participation, and learners' reactions to the programs. If the goal is to improve English among non-English speaking learners and the data concretely show workers are asking questions of their supervisor when problems arise, it is a positive indication in achieving the goal.

B. THE IMPACT OF THE PROGRAM ON BOTH THE LEARNER AND THE COMPANY

Focus on the quality of work production and worker performance. Compare learners' pre-program competency skills with post-program competency. Notice any

changes that occurred as a result of the program.

C. WAYS TO IMPROVE THE PROGRAM

The data collected serve as a basis to improve program resources, teaching methods, instruction, or competencies. The information collected is used to make informed decisions about the improvement, elimination, replication, redesign of curriculum, delivery of instruction, developing new goals, or success of the program. Data must be seen as an investment to enhance the program and its subsequent outcomes.

> ***During an evaluation process, data are collected, interpreted, and used for making decisions about program improvements, redesign, and success.***

REPORTING EVALUATION RESULTS

The final step in the evaluation process is reporting the results. Writing an evaluation report is the tool for this purpose. Reports are precise, factual, objective summaries that contain organized presentations of pertinent information that lead to constructive recommendations. The organization of a report might consist of a preliminary page, an introduction, a main section, and a supplement.

The preliminary page is a brief synopsis of the whole report that reduces most of the information to about 10% of the report's length.

The introduction puts the report within a specific context by making brief statements about the purpose, subject, background, scope, and organization of the report.

The main section contains a succinct analysis about important findings of the evaluation. Recommendations are proposed with suggestions on how they might be put into action.

The supplementary section contains summaries of data, records, graphs, charts, tables, and questionnaires about significant points mentioned in the main section of the report.

Finally, everyone involved in workplace education needs to understand the program's contribution to the company. Learners need to know what the program did for them personally. (Addendum pages 100-122)

The best reward that can be given to people involved in workplace education is knowledge that their work and efforts make a difference.

STAFF DEVELOPMENT

STAFF DEVELOPMENT

The previous chapters in this guidebook highlight some of the important components involved in establishing and monitoring a successful workplace education program. It is imperative that the concluding chapter in this book emphasizes further the importance of staff development to corporate/agency retention and expansion. Staff development is workplace education. Workplace education is staff development.

The purpose of staff development is to prepare individuals or groups to be as effective as possible in fulfilling their respective tasks or assignments. Staff includes anyone who has a share or an interest in the workplace project. Personnel who provide staff development, whether inside or outside the company/agency, must have the knowledge and skills necessary to ensure the attainment of a quality program.

Unfortunately, training staff is often considered a burden because of financial and time constraints and the frequent perception that it takes people away from their productive activities. Nevertheless, all staff persons need customized training to prepare them for the roles they perform. Each person, no matter how experienced, needs an opportunity to extend his or her knowledge and skills through professional development.

Topics should be relevant and applicable to each individual's role in the program. For example, instructors need to understand the principles of adult learning, what workers do on the job, and how to integrate job-related materials with basic-skills materials. Supervisors need to relate workers' basic skills to their work requirements

in order to assist instructors. The partnership team could use training in team building and collaborative techniques. Everyone would benefit from communication skills training to provide constructive feedback and answer questions that might emerge from the daily operation of the project.

Continued, on-going educational development by staff members supports the concept of lifelong learning among workers.

The initial task of those responsible for staff development is to plan and manage various types of training. The professionals who do the training must be qualified, whether they are company representatives, university/college educators, or other consultants in the field. Staff development procedures should be simple, practical and specific. Examples include:

- Conferences, workshops, seminars.
- Observation, peer teaching/assistance.
- Site visits.
- Communication with resource people/consultants via phone, visits, e-mail.
- Small group discussions.
- Printed resources: training manuals, visual aids, use of program library.

The CORE of staff development centers on the program's goals and objectives, strategies on how to achieve them, how learning is facilitated, how skills are applied in the workplace, and how the program is evaluated.

Staff development is KEY to building an efficient educational program. This book is a resource for that purpose and is the reason it was written.

(Addendum pages 123-125)

BASIC COMPONENTS
OF A
WORKPLACE EDUCATION PROGRAM

1. **Employees, employers, union officials, and educators work collaboratively to design, implement, direct, and evaluate the program.**

2. **Needs assessments target job skills that workers use daily or will need in the near future.**

3. **The curriculum is custom-designed to fit the actual work requirements unique to each worksite.**

4. **Job information and data that are relevant to workers' needs are used as primary materials for educational instruction.**

5. **Basic skills training begins and builds on the knowledge and experiences that employees already possess.**

6. **On-going evaluation procedures are structured to provide feedback to optimize the benefits of the workplace education program.**

WORKPLACE EDUCATION ADDENDUM

Workplace Eduction Brochure

Workplace Education Process and How It Works

THE CHANGING WORKPLACE

Human capital is the nation's greatest asset and resource. The future of private sector productivity lies with the education of its employees.

Technology has changed the nature of the workplace. Workers are asked to perform tasks requiring higher basic skills levels in reading, writing, math, problem solving, and communication.

For businesses, industries, and health care facilities to succeed in a highly competitive market, they must invest in the continuous education of their employees.

Organizations with which MCDI has been affiliated.

United Technologies
Danaher Group
AT&T
Kidder Stacy
Digital
Geriatric Authority of Holyoke
Continental Cable
Springfield College
Mass Mutual Life Insurance Co.
Baystate Medical Center
Mercy Hospital
Springfield Institution for Savings
Mariott Hotels
Dennison National
Asea, Brown, and Bauer
Northeast Utilities
City of Springfield
City of Agawam

Courses have included CAD, Customer Service, Electronics, Welding, Mathematics, CNC, Communication Skills, Problem Solving, Team Building, Quality Assurance, Office Technology Skills and Software Applications.

PARTNERS IN EDUCATION

MASSACHUSETTS CAREER DEVELOPMENT INSTITUTE
140 WILBRAHAM AVENUE
SPRINGFIELD, MA 01109
(413) 781-5640

MEANING OF WORKPLACE EDUCATION

Workplace education is an on-site, customized educational program designed to assist employers and employees to enhance basic skills in order to function more successfully on the job.

Basic skills refer to a broad range of abilities necessary to function well in the workplace. The focus is on integrating basic skills instruction with technical training. Learning materials are custom designed to fit the work requirements unique to each worksite.

Workplace education instruction involves group-based and one-on-one instruction that is related to the work or the activities individual workers regularly perform on the job.

COMPONENTS OF WORKPLACE EDUCATION

- Employees, employers, labor union officials and educators work collaboratively to design and implement the program.
- Needs Assessments target job skills that workers use daily or will need in the near future.
- The curriculum is customized and developed to address specific job skills.
- Job information and data that are relevant to workers' needs are used as primary materials for educational instruction.
- Basic skills training begins and builds on the experiences and knowledge that employees already possess.
- On-going evaluation provides feedback to ensure greater program success.

BENEFITS OF WORKPLACE EDUCATION

AGENCY AND EMPLOYEE BENEFITS

- Creates a more competitive, productive, efficient and constructive worker.
- Strengthens job satisfaction and greater organizational pride.
- Improves safety practices, thus reducing liability and health insurance.
- Increases workers' capacity to perform a wider range of job tasks.

* * * * * * *

- Increases relevance of education in industry.
- Enhances job security.
- Improves opportunities for job promotion and career advancement.
- Increases workers' self-esteem and confidence.
- Strengthens adaptability to new technology.

Massachusetts Career
Development Institute

THE WORKPLACE EDUCATION PROCESS AND HOW IT WORKS

140 Wilbraham Avenue
Springfield, MA 01109

The Workplace Education Process is a brief summary of the six components that encompass a Workplace Education Program. Copies may be obtained at MCDI.

BEST COPY AVAILABLE

THE PARTNERSHIP TEAM
ADDENDUM

MCDI Brochure

GAH Brochure

UFCW Brochure

Building the Partnership Team Form

Partnership Team Forms:
Attendance Record
Agenda
Partnership Team Meeting Notes

For the past 25 years, the Massachusetts Career Development Institute has met the challenges presented by an ever-changing economy. Initially founded to train people to meet employment needs of local private industry, MCDI has added programs for the retraining of displaced workers and for the upgrading of skills of those already in the workplace. Today, MCDI offers a variety of vocational programs and academic courses.

MCDI programs are hands-on learning experiences designed to give students the knowledge they need to enter the workforce and also the confidence which is so essential. These intensive programs run from 8 to 42 weeks, and include...

Education Services

Basic Studies: Students work with instructors and tutors to advance skills in the areas of reading, writing, and mathematics.

ESL (English as a Second Language): The student is provided an education forum to enhance language skills as well as learning about community living skills, customs, culture, and preparation for acquiring employment.

GED (High School Equivalency): Students participate in the GED component which reviews reading, writing, and mathematics as well as test taking skills.

Programs

Office Systems Technology: Up-to-date office skills from data entry to word processing with training available for specialized offices such as medical and accounting and a six week internship with a local company.

Culinary Arts: Students study food preparation, nutrition, safety and hygiene. Culinary techniques include baking, catering, and serving.

Graphic Technology/Offset Printing: The program introduces the basic procedures required for long-term employment. These include: typesetting, layout, paste up, darkroom techniques, press work, computer graphics, platemaking, desktop publishing, and customer relations.

Environmental Technician: Students can be part of a growing field. After training, students are eligible for licenses and/or certifications in Asbestos Abatement, Lead Paint Abatement, and Hazardous Materials Containment.

Health Careers: Classroom instruction and direct patient care prepare students for careers as a Certified Nurse Aid or a Certified Home Health Aid. Elective courses in phlebotomy and EKG are offered.

Electronics Assembly/Technology: Students study the basic assembly skills used in production, quality control techniques and analog and digital theory, devices and circuitry. Assigned practical lab competencies encompass installation, operation, preventative maintenance, and repairs of electronic equipment.

Quality Assurance: Students learn the latest quality assurance techniques including just-in-time, ISO9000, total quality management, and statistical control.

Metal Fabrication: Students develop skills in welding and metal fabrication including mathematics, blueprint reading, and CAD.

Machine Technology: Students explore methods in machining, blueprint reading, basic drafting, and CAD.

Tool and Die: The advanced student has the opportunity to work with precision machines and to study advanced machining procedures.

GERIATRIC
AUTHORITY
OF HOLYOKE

45 Lower Westfield Road
Holyoke, MA 01040
(413) 536-8110
FAX (413) 533-7999

nursing and convalescent center

Welcome to the
Geriatric Authority of Holyoke
Nursing and Convalescent Center

Providing health care for our elders is our major focus. We're also committed to making you or your family member comfortable and happy during their stay here. We're fully staffed with professional health care personnel, which includes highly qualified nurses and a medical director.

Our staff, comprised of professionals in geriatric services, is available 24-hours a day to assure that the needs of residents are met. GAH philosophy begins and ends with a commitment to provide quality care in a safe, nurturing environment.

Visiting & Excursions

Visiting hours at the nursing home are daily from 11:00 a.m. to 8:00 p.m. During periods of acute illness or special occasions, visiting hours are flexible. We encourage visits by children. A playground is available at the Center.

Residents wishing to leave the Center for part of the day and return the same day may do so as often as possible. Our only requirement is that a medical clearance be obtained and the resident sign out.

Dining & Refreshments

All residents are encouraged to go to the dining room unless they are unable because of medical problems. Tray service will be furnished for residents who must remain on the unit. Personal telephones and small television sets are welcome in the resident's room.

Medical & Personal Care

Registered nurses are on duty 24-hours a day at the Center. The nursing staff provides all necessary services to assure that the needs of the residents are met. Each resident has their choice of personal physician and this choice will be honored at all times unless there is an emergency. Personal physicians visit the residents regularly at the Center and are available by phone 24-hours a day. Visits to residents by a dentist, optometrist, ophthalmologist, podiatrist or other specialist will be arranged at the request of the resident or family, or when the resident's physician feels these services are necessary. There is no smoking allowed in GAH's Nursing & Convalescent Center. It offers its residents a smoke-free environment.

Special Programs & Activities

The variety of special programs and activities which the Center offers are designed for both recreation and personal growth. These programs include:

- current events discussion groups
- sensory stimulation
- music and art therapy
- reminiscent groups
- bingo
- picnics
- visiting pets program

The residents also participate in community events such as an annual "Bake-Off" with area nursing homes, and lend a helping hand to organizations such as the American Heart Association. A pub is available to the residents three times a week. Beer, wine and mixed drinks are served to the residents with a doctor's order.

A beauty/barber shop is available at the Center. Our beauticians offer cuts, permanents, wash and sets and other services on a weekly basis. Arrangements for payment are handled by the Center's Business Office prior to hair appointments. Residents are welcome to have their own hairdresser or barber use our hairdressing facilities.

Church services are held in the Center's Chapel. A schedule of services is posted on the bulletin board in each unit. Residents' request for visits by the clergy will be arranged by the Activity Director.

All of the programs and activities of the Nursing & Convalescent Center are aimed at allowing our elders continued growth and fulfillment in all physical, emotional and spiritual aspects of their lives.

UFCW Local 1459 represents over 6,000 members in Western Massachusetts, a part of the 1.4 million member UFCW International Union.

Established in 1938, Local 1459 has a long, rich history of progressive, aggressive action on behalf of its members.

Officers and staff are involved in political and community activities within the Commonwealth of Massachusetts

UFCW is represented on various community boards:
Northampton Housing Authority,
United Way,
Regional Employment Board,
UMass Labor Center Advisory Board,
Blue Cross/Blue Shield Advisory Board,
Pioneer Valley Project Board,
and the
Geriatric Authority Of Holyoke (GAH) Workplace Education Advisory Council

Local 1459 has proudly represented GAH employees as their collective bargaining agent since 1979.

BUILDING THE PARTNERSHIP TEAM

List the names of people who would be effective members of a workplace education partnership team.

UPPER MANAGEMENT

_____
_____
_____

MID MANAGEMENT

_____
_____
_____

SUPERVISORS

_____
_____
_____

UNION REPRESENTATIVES

_____
_____
_____

EMPLOYEES

_____
_____
_____

STAFF EDUCATORS

_____
_____
_____

OUTSIDE EDUCATIONAL PROVIDERS

_____
_____
_____

EVALUATORS

_____
_____
_____

OTHERS

_____
_____
_____

UNITED STATES DEPARTMENT OF EDUCATION
NATIONAL WORKPLACE EDUCATION PROGRAM

Massachusetts Career Development Institute
Geriatric Authority of Holyoke
United Food and Commercial Workers Union, Local 1459

PARTNERSHIP TEAM ATTENDANCE RECORD

DATE_____

NAME	AGENCY

UNITED STATES DEPARTMENT OF EDUCATION
NATIONAL WORKPLACE EDUCATION PROGRAM

Massachusetts Career Development Institute
Geriatric Authority of Holyoke
United Food and Commercial Workers Union, Local 1459

PARTNERSHIP TEAM MEETING AGENDA

DATE October, 1996

- Testing and Assessment for New Classes
- Schedules
- Reading, Writing, and Math as Related to the Flow Sheet and Job Performance
- Holiday Schedules
- Curriculum Update
- Dissemination of Curriculum
- GED Classes
- The Lifelong Learning Center
- Testing in the Future
- Continuing the Process in Orientation

UNITED STATES DEPARTMENT OF EDUCATION
NATIONAL WORKPLACE EDUCATION PROGRAM

Massachusetts Career Development Institute
Geriatric Authority of Holyoke
United Food and Commercial Workers Union, Local 1459

PARTNERSHIP TEAM MEETING MINUTES

DATE_____

AGENDA: PLANNING FOR AWARDS CEREMONY

1.	SPEAKERS	Frank Gulluni, Executive Director of MCDI Edward Brunelle, Executive Director of GAH William Hamilton, Mayor of the City of Holyoke.
2.	PRESENTATION OF CERTIFICATES	Mary Beth Phair Patricia Camerota Carol Ann Novogroski
3.	SONG PRESENTATION	Lorry Villemaire
4.	ENDING	Take the opportunity to encourage people to continue classes and welcome others to start.
5.	COFFEE, PUNCH, CAKE	
6.	THANKS	Mary Beth Phair - GAH Dorothy Seidel - GAH Lorry Villemaire - MCDI Joe Langone - MCDI Instructor All employees who have participated.

NEEDS ASSESSMENT PROCESS
ADDENDUM

Employee Basic Skills Needs Assessment

Employer Needs Assessment Interview Questions

Math Diagnostic Test

Modified Tennessee Self-Concept Survey

Nurses' Aide Workplace Assessment Competency

EMPLOYEES BASIC SKILLS NEEDS ASSESSMENT

1. Performing job-tasks require the use of many basic skills, particularly reading, mathematics, writing, listening, and speaking. Rate the level of basic skills competency required in your particular job.

1 Does not apply	3. At level needed for the job
2. Above average	4. Below average

READING	____	LISTENING	____
MATHEMATICS	____	SPEAKING	____
WRITING	____		

2. Check specific skills in each category that you would like to develop further.

READING	Pronounce words correctly	____
	Read for factual information	____
	Understand and follow written directions	____
	Draw conclusions from readings	____
	Read for meaning, getting the main idea	____
MATHEMATICS	Compute: addition, subtraction, multiplication, division, fractions, decimals	____
	Convert and measures	____
	Solve word problems	____
	Estimate values	____
	Use a calculator	____
WRITING	Capitalize and punctuate correctly	____
	Spell correctly	____
	Write sentences and paragraphs	____
	Use proper grammar	____
	Write legibly	____
LISTENING	Understand concepts and information	____
	Apply information heard	____
	Draw main ideas from speech	____
	Pay attention	____
SPEAKING	Possess adequate vocabulary	____
	Communicate well on phone	____
	Give clear directions and information	____
	Maintain eye-to-eye contact	____

KINDLY SUBMIT YOUR JOB DESCRIPTION WITH THIS ASSESSMENT.

EMPLOYERS NEEDS ASSESSMENT
INTERVIEW QUESTIONS

1. Who are your employees?

   Number of Employees — Gender
   Race — Age

2. What product or services does this facility provide?

3. To what extent do you use a computerized system within the facility?

4. What type of management style is used?

5. What kind of training do employees presently receive?

6. How has your facility changed in the last five years?

7. Where do you wish to be in five years?

8. Do you think your employees need new skills to keep up with changes in technology? If so, why.

9. Do you have plans to increase services/products or improve their quality?

10. Would a Workplace Education Program help achieve this growth?

11. What skills would employees need? (English language, reading, math, team building, problem solving, safe environment, computer, etc.)

12. Would employees be embarrassed to admit they need basic skills training?

13. What would be some of the barriers in establishing a Workplace Education Program?

MATH DIAGNOSTIC TEST

NAME_____ DATE_____

When computing your answers, show your number work on these pages.

MULTIPLICATION TABLES

2 X 1 = ____	6 X 8 = ____
3 X 9 = ____	4 X 7 = ____
12 X 10 = ____	9 X 5 = ____
5 X 0 = ____	8 X 4 = ____
11 X 4 = ____	10 X 2 = ____

ADDITION

```
   9        12        464
   7        55        647
   5        74        528
   4        37        786
   6        49        953
   2   +    86   +    275
 + 8
```

```
   285346      380240      5237
 + 465987    +  76095      4785
                           6876
                       +   8569
```

SUBTRACTION

```
   17        437       1289
 - 9       - 29      - 435
```

745 - 246	620 -443	84239 -36544

MULTIPLICATION

9 x 7	14 x 9	34 x23
75 x30	762 x 56	206 x 250

DIVISION

$7\overline{)63}$	$7\overline{)2807}$	$12\overline{)384}$
$9\overline{)2007}$	$16\overline{)4864}$	$126\overline{)27090}$

FRACTIONS - ADDITION (Simplify Answers)

$$\begin{array}{r} \frac{1}{8} \\ \frac{3}{8} \\ \frac{5}{8} \\ +\ \frac{}{} \end{array}$$

$$\begin{array}{r} \frac{1}{6} \\ \frac{1}{8} \\ \hline \end{array}$$

$$\begin{array}{r} 15\ \frac{1}{8} \\ 20\ \frac{6}{8} \\ \hline \end{array}$$

$$\begin{array}{r} 19\ \frac{7}{8} \\ +\ 12 \\ \hline \end{array}$$

$$\begin{array}{r} 27\ \frac{5}{12} \\ 13\ \frac{3}{8} \\ \hline \end{array}$$

$$\begin{array}{r} 30\ \frac{1}{2} \\ 16\ \frac{1}{3} \\ \hline \end{array}$$

FRACTIONS - SUBTRACTION (Simplify Answers)

$$\begin{array}{r} \frac{4}{9} \\ -\ \frac{1}{9} \\ \hline \end{array}$$

$$\begin{array}{r} \frac{3}{7} \\ -\ \frac{1}{6} \\ \hline \end{array}$$

$$\begin{array}{r} \frac{1}{3} \\ -\ \frac{1}{4} \\ \hline \end{array}$$

$$\begin{array}{r} 21\ \frac{3}{4} \\ -\ 9\ \frac{5}{8} \\ \hline \end{array}$$

$$\begin{array}{r} 19 \\ -\ 7\ \frac{2}{3} \\ \hline \end{array}$$

$$\begin{array}{r} 30\ \frac{1}{8} \\ -\ 14\ \frac{1}{4} \\ \hline \end{array}$$

FRACTIONS - MULTIPLICATION (Simplify Answers)

5 x 3/10 =

1/2 x 4/5 =

3/4 x 25 =

9 x 2 1/3 =

8 1/3 x 3/5 =

3 1/3 x 2 2/5 =

FRACTIONS - DIVISION (Simplify Answers)

3/8 ÷ 3 =

3 ÷ 3/8 =

12 ÷ 1/6 =

4 2/3 ÷ 7/8 =

5 1/3 ÷ 1/2 =

10 1/2 ÷ 1 3/4 =

DECIMALS - ADDITION

.4 + .5	.2 .6 .3 + .8	108.75 + 235.87
1.046 .87 .9 + 4.	$217.43 7.15 29.00 + 4.35	263.0005 + 17.6

DECIMALS - SUBTRACTION

.9 - .4	128.9 - 19.8	216.5 - 19.
137. - 15.8	25.004 - 16.	372. - 135.006

DECIMALS - MULTIPLICATION

.4 x .9	1.5 x .9	.025 x .3
.15 x .06	.004 x .03	3.54 x 2.1

DECIMALS - DIVISION

$.005\overline{)\ .25}$ $15\overline{)\ 2.25}$ $1.3\overline{)\ .039}$

$1.2\overline{)\ 48}$ $.15\overline{)\ 75}$ $5\overline{)\ 3}$

CONVERSIONS - FRACTIONS TO DECIMALS

$\frac{1}{5} =$ _____ $\frac{17}{25} =$ _____

$\frac{3}{4} =$ _____ $1\ \frac{2}{3} =$ _____

$\frac{1}{6} =$ _____ $3\ \frac{3}{10} =$ _____

CONVERSIONS - DECIMALS TO PERCENTS

.4 = _____%

.08 = _____%

.45 = _____%

.008 = _____%

$.06\frac{2}{3}$ = _____%

5. = _____%

PERCENTS

20% of 45 = _____

8 is _____% of 400

6% of 300 = _____

25 is _____% of 200

90% of 80 = _____

100 is _____% of 80

RATIO - Circle the number of equal ratio.

4/5 = 9:10, 12:16, 12:14, 20:25

3:2 = $\frac{6}{4}$, $\frac{10}{12}$, $\frac{15}{20}$, $\frac{2}{3}$

7:10 = $\frac{20}{14}$, $\frac{14}{20}$, $\frac{13}{20}$, $\frac{10}{7}$

$\frac{6}{7}$ = 14:12, 18:20, 7:6, 12:14

PROPORTION

$\frac{3}{4} = \frac{\quad}{20}$ $\qquad$ $\frac{7}{\quad} = \frac{21}{6}$

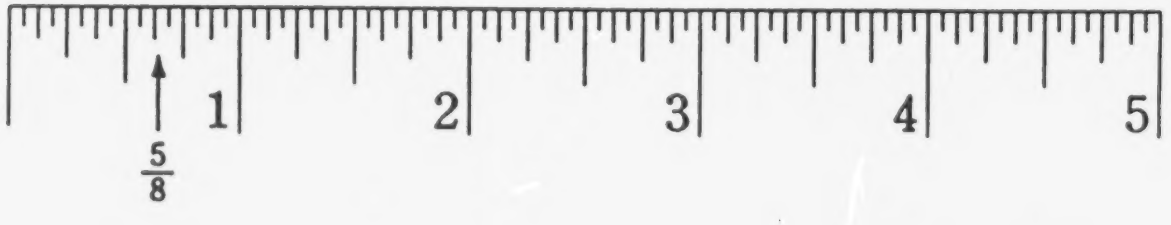
$\frac{5}{8} = \frac{75}{\quad}$ $\qquad$ $\frac{N}{12} = \frac{10}{24}$ N = ____

$\frac{4}{9} = \frac{24}{\quad}$ $\qquad$ $\frac{1}{3} = \frac{N}{36}$ N = ____

MEASUREMENTS - RULER READING

On the ruler below, point out the following measurements in the same way that 5/8 is done.

5/16 $\qquad$ 1 1/2 $\qquad$ 2 3/4 $\qquad$ 3 1/8



CONVERSIONS

1 foot = _____ inches

1 quart = _____ pints

1 cup = _____ ounces

1 day = _____ hours

1 year = _____ weeks

1 yard = _____ feet

1 pound = _____ ounces

1 hour = _____ minutes

60 seconds = _____ minutes

1 dozen = _____ items

MODIFIED TENNESSEE SELF-CONCEPT SURVEY

Put a circle around the response number you have chosen for each statement.

Completely False	1	Mostly True	4
Mostly False	2	Completely True	5
Partly False and Partly True	3		

---

1. I have a healthy body. 1 2 3 4 5
2. I like to look nice and neat all the time. 1 2 3 4 5
3. I am an attractive person. 1 2 3 4 5
4. I am full of aches and pains. 1 2 3 4 5
5. I consider myself a sloppy person. 1 2 3 4 5
6. I am a sick person 1 2 3 4 5
7. I am neither too fat nor too thin 1 2 3 4 5
8. I am neither too tall nor too short 1 2 3 4 5
9. I like my looks just the way they are 1 2 3 4 5
10. I don't feel as well as I should 1 2 3 4 5
11. I would like to change some parts of my body 1 2 3 4 5
12. I should have more sex appeal 1 2 3 4 5
13. I am a decent sort of person 1 2 3 4 5
14. I am a religious person 1 2 3 4 5
15. I am an honest person 1 2 3 4 5
16. I am a moral failure 1 2 3 4 5
17. I am a bad person 1 2 3 4 5

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18. I am a morally weak person 1 2 3 4 5

19. I am satisfied with my moral behavior 1 2 3 4 5

20. I am as religious as I want to be 1 2 3 4 5

21. I am satisfied with my relationship with God 1 2 3 4 5

22. I wish I could be more trustworthy 1 2 3 4 5

23. I ought to go to church more 1 2 3 4 5

24. I shouldn't tell so many lies 1 2 3 4 5

25. I am true to my religion in my everyday life 1 2 3 4 5

26. I do what is right most of the time 1 2 3 4 5

27. I try to change when I know I'm doing things that are wrong 1 2 3 4 5

28. I sometimes use unfair means to get ahead 1 2 3 4 5

29. I sometimes do very bad things 1 2 3 4 5

30. I have trouble doing the things that are right 1 2 3 4 5

31. I am a cheerful person 1 2 3 4 5

32. I have a lot of self-control 1 2 3 4 5

33. I am a calm and easy going person 1 2 3 4 5

34. I am a nobody 1 2 3 4 5

35. I am a hateful person 1 2 3 4 5

36. I am losing my mind 1 2 3 4 5

37. I am satisfied to be just what I am 1 2 3 4 5

38. I am as smart as I want to be 1 2 3 4 5

39. I am just as nice as I should be 1 2 3 4 5

40. I can always take care of myself in any situation 1 2 3 4 5

41. I solve my problems quite easily 1 2 3 4 5

42. I take the blame for things 1 2 3 4 5

43. I change my mind a lot 1 2 3 4 5

44. I do things without thinking about time 1 2 3 4 5

45. I try to run away from my problems 1 2 3 4 5

46. I have a family that would always help me in any kind of trouble 1 2 3 4 5

47. I am an important person to my friends and family 1 2 3 4 5

48. I am a member of a happy family 1 2 3 4 5

49. I am not loved by my family 1 2 3 4 5

50. My friends have no confidence in me. 1 2 3 4 5

51. I feel my family doesn't trust me 1 2 3 4 5

52. I try to play fair with my friends and family 1 2 3 4 5

53. I do my share of work at home 1 2 3 4 5

54. I take a real interest in my family 1 2 3 4 5

55. I quarrel (argue) with my family 1 2 3 4 5

56. I give in to my parents 1 2 3 4 5

57. I do not act like my family thinks I should 1 2 3 4 5

58. I am a friendly person 1 2 3 4 5

59. I am popular with girls 1 2 3 4 5

60. I am popular with boys 1 2 3 4 5

61. I am mad at the whole world 1 2 3 4 5

62. I am not interested in what other people do 1 2 3 4 5

63. I am hard to be friendly with 1 2 3 4 5

64. I try to understand the other person's point of view 1 2 3 4 5

65. I see good points in all the people I meet 1 2 3 4 5

66. I get along well with other people 1 2 3 4 5

67. I do not feel at ease with other people 1 2 3 4 5

68. I do not forgive others easily 1 2 3 4 5

69. I find it hard to talk to strangers 1 2 3 4 5

70. I do not always tell the truth 1 2 3 4 5

71. Once in a while I think of things too bad to talk about . . . 1 2 3 4 5

72. I get angry sometimes 1 2 3 4 5

73. Sometimes, when I am not feeling well, I am cross 1 2 3 4 5

74. I would rather win than lose in a game 1 2 3 4 5

75. Once in a while, I do tomorrow what I ought to do today . 1 2 3 4 5

NURSES' AIDE WORKPLACE ASSESSMENT COMPETENCY

NAME_____ DATE_____

Circle the letter that provides the BEST answer to each statement.

1. A nurses' aide finds out that a resident has cancer. She should
   a. tell the family when they visit
   b. notify the pastoral minister
   c. keep the information confidential
   d. tell her friends

2. To practice good hygiene is to be
   a. loyal b. clean c. competent d. faithful

3. The best way to end a conversation is to
   a. say the topic is not interesting
   b. walk out of the room
   c. say the conversation is interesting but the work must be done
   d. ask another aide to finish the conversation

4. A barrier to conversation is
   a. eye to eye contact
   b. no eye to eye contact
   c. calling the resident by name
   d. speaking slowly and clearly

5. When caring for persons with different faiths
   a. respect each person's belief
   b. help persons understand your faith
   c. show how wrong their faith is
   d. arrange for clergy person to visit

6. You see a co-worker steal supplies and fail to report it. You are guilty of
   a. malpractice b. gossip c. aiding a crime d. disloyalty

7. Care given to a person is determined by
   a. race b. color c. need d. creed

8. The first person to take out of the building in case of a fire is
   a. an ambulatory resident
   b. those who are bedbound
   c. a resident who is blind or deaf
   d. wheelchair residents

9. A fire hazard is
   a. uncontrolled smoking
   b. over-loaded circuits
   c. frayed electrical wires
   d. all of the above

10. A restraint is only used
    a. to help the nursing staff
    b. when ordered by the physician
    c. to keep the resident quiet
    d. none of the above

11. A health care aide working with older people needs
    a. patience b. kindness c. sense of humor d. all of the above

12. When residents make sexual advances, the aide should
    a. slap the resident
    b. leave the room
    c. gently tell the person the behavior is inappropriate

13. A tube that goes through the nose and into the stomach is
    a. nasogastric
    b. gastrostomy
    c. intravenous infusion
    d. hyperalimentation

14. Before making any bed
    a. raise the side rails
    b. raise the bed
    c. lower the bed
    d. ask for assistance

15. Staying in one position for a long time leads to
    a. improved circulation
    b. skin breakdown
    c. more flexible joints
    d. greater comfort

16. To prevent a decubitus ulcer
    a. keep head of bed raised
    b. tuck sheets tightly around the bed
    c. change resident's position often
    d. have resident take proper medication

17. A vital sign is
    a. an emergency
    b. stable
    c. blood pressure
    d. responsibility

18. If a temperature is 104 F, the aide should
    a. notify the supervisor
    b. pull the emergency switch
    c. shake the mercury down
    d. record it on the chart

19. The BEST response to a family member who lost a loved one is
    a. don't feel badly
    b. speak to your minister
    c. don't act this way
    d. would you like to talk

20. A right of a terminally ill patient is to
    a. receive extraordinary medical care
    b. be treated with dignity and care
    c. receive lots of visitors
    d. be left alone often

21. Removed dentures are stored in
    a. a cabinet over the sink
    b. a soaking solution in denture cup
    c. the bedside table
    d. the emesis basin

22. Dirt is BEST removed from under the fingernails with
    a. scissor tips
    b. an emery board
    c. nail clippers
    d. an orange stick

23. How many times during a shift should the aide wash his/her hands?
    a. before/after contact with resident
    b. beginning and end of shift
    c. once before the shift ends
    d. before and after serving meals

24. Which of the following is considered in recording output?
    a. vomit
    b. perspiration
    c. blood loss
    d. all of the above

25. The Heimlich Maneuver should be used if a resident is
    a. confused
    b. choking
    c. vomiting
    d. diabetic

Answer true or false to the following statements.

26. Blood spills on the floor may be wiped at the aide's convenience. _____
27. A clean gown is put on before entering an isolation unit. _____
28. When washing hands, hold the fingertips upward. _____
29. All people go through stages of growth from birth to death. _____
30. A task for the geriatric resident is to deal with loss. _____
31. Ice cream is served on a clear liquid diet. _____
32. Residents should eat about 10-12 ounces of meant daily to be healthy. _____
33. Oral hygiene procedures begin and end with washing hands.
34. Bone structure remains the same if dentures are not worn for several days. _____
35. Women's facial hair is removed with a safety razor. _____
36. When helping someone dress, lay out the clothes so that the first item worn is on the bottom. _____
37. The average fluid intake per day is 500 cc. _____
38. There is a cure for Alzheimer's Disease. _____
39. Honest communication is unimportant when dealing with burnout. _____
40. Addictions are attempts to avoid stress. _____
41. Mobility means the ability to move about. _____
42. To apply TEDS/BRACE is documented on the flow sheet as an assist. _____
43. An independent resident needs assistance in dressing. _____
44. A bath can be omitted if a resident is receiving an IV. _____
45. The urethra carries urine from the bladder to the outside of the body. _____
46. A sign of burnout is high self esteem and personal confidence. _____
47. The resident is most comfortable in a closed bed. _____
48. Color coding helps aides identify the type of disease to be controlled._____
49. It is best to give a confused resident one instruction at a time. _____
50. The position of bed residents should be changed every four hours. _____

PROGRAM GOALS ADDENDUM

Program Goals

PROGRAM GOALS

This page contains some of the goals established for the GAH/MCDI/UFCW Workplace Education Program.

- Assess all GAH employees who are interested in participating in the program during the first month of program operation.
- Provide each ABE or ESL participant with a set of educational experiences that will allow 75% of them to demonstrate a two-grade level increase in basic reading and math skills.
- Provide each GED participant with educational experiences that will ensure that 85% of those who take the exam will pass it.
- Provide appropriate educational experiences to program participants that will result in passing grades by 85% of those individuals taking the State Nurses' Aide Licensing exam.
- Demonstrate that at least 85% of the individuals participating in the project have an improved level of self-esteem, as measured by a modified version of the Tennessee Self-Concept Inventory.
- Demonstrate, through survey instruments, improvement in productivity and/or quality of work by a minimum of 85% of those individuals participating in this program.
- Develop a successful model of Workplace Education that can be replicated locally or in other areas of the country.
- Demonstrate an improved attendance rate for employees who participate in the project.
- Develop a transition plan for GAH and the Union to assume responsibility for the continuation of the project subsequent to the Federal funding commitment.

CURRICULUM DESIGN ADDENDUM

Curriculum Development Process:
A Practical Application

Introduction to Math Curriculum Brochure

Quality Assurance Curriculum Brochure
with Reading Comprehension Skills

Activity Aide Handbook Brochure

Nurses' Aide Curriculum Brochure

Basic Education Textbook Integration
with Job-Related Materials

CURRICULUM DEVELOPMENT PROCESS - A PRACTICAL APPLICATION

Using job-related materials as a springboard for adult learning in the workplace is the foundation for curriculum development. The purpose of this section is to demonstrate the PROCESS of integrating job-related materials with commercially produced basic education textbooks. Although the content of these demonstration materials may not be applicable to the reader's situation, the PROCESS may be applied and replicated in any workplace environment.

Essentially, all curriculum must have some type of organizational structure or format. The curriculum structure best suited to measure workers' ability to apply skills on the job is a competency-based format. Should readers wish more information on this subject, MCDI has published a 37-page book entitled, A Guide on How to Develop Competency-Based Curriculum and is available for a fee of $10.00, including postage.

A GUIDE ON

HOW TO DEVELOP A

COMPETENCY-BASED CURRICULUM.

© Massachusetts Career Development Institute
140 Wilbraham Avenue
Springfield, MA 01109
(413) 781-5640

Systems of Adult Basic Education Support
Holyoke Community College
303 Homestead Avenue
(413) 538-7000

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Curriculum must be tailored to the explicit needs of workers, containing materials they actually use on the job. At the Geriatric Authority of Holyoke, an explicit need was for CNAs to pass a written examination required by the state of Massachusetts in order to maintain their employment status.

The state test consisted of 100 multiple choice questions in six broad categories covering 36 specific skills. A Nurses' Aide Curriculum was developed focusing on reading comprehension, vocabulary, and English grammar skill. The result was 19 separate booklets highlighting specific skills CNAs perform daily on the job.

WORKPLACE EDUCATIONAL DEVELOPMENT

Nurses' Aide Curriculum

TABLE OF CONTENTS

A. Role of the Nurses' Aide
B. Effective Communication Skills
C. Patient's Bill of Rights - Ethical And Legal Issues
D. Infection Control and Isolation Procedures
E. Safety Precautions
F. Basic Human Needs
G. Nutrition
H. Bedmaking and Measuring Height and Weight
I. Transporting Residents
J. Vital Signs
K. Oral Hygiene
L. Nailcare, Shaving
M. Bathing, Dressing, Hair Care
N. Fluid Intake and Output; AM and PM Care
O. Elimination; medical Terminology, Abbreviations and Vocabulary
P. Alzheimer's Disease
Q. Death and Dying
R. Stress Management
S. Employment Professionalism - Daily Resident Care Flow Sheet

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For the purpose of illustration, pages from one book of the 19 booklets, Oral Hygiene, are included here. The diagram below shows the competency-based format.

COMPETENCY	**ORAL HYGIENE**
OBJECTIVES	1. To increase vocabulary and reading comprehension through oral hygiene skills and procedures. 2. To express oral care procedures more confidently in English. 3. To impress on employee that good oral hygiene helps prevent potential upper respiratory infection.
PROCEDURES	1. Brushing Teeth and Massaging Gums 2. Flossing the Teeth 3. Dentures 4. Removing and Cleaning Partial or Complete Dentures 5. Storing Dentures 6. Mouth care 7. Replacing Dentures 8. Mouth care for Bed Ridden Residents
SUPPLEMENTARY EDUCATIONAL MATERIALS	Readings: 1. Assisting with Routine Oral Hygiene 2. Assisting with Special Oral Hygiene 3. Mouthcare for Helpless Patients Videos: 1. CNA 204 Oral Care Techniques 2. C323 Comprehensive Approach: Oral Care
COMPETENCY TEST	Oral Hygiene Competency Test

On the previous page, notice #2 under procedures, Flossing the Teeth. The page stating job-related information on the topic is included here.

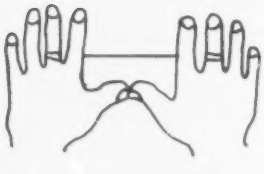
FLOSSING THE TEETH

The use of dental floss is a relatively new procedure over the last twenty years. Because of this, many residents never developed the habit of flossing their teeth or learned of its importance. Flossing stimulates the gums and removes food from between the teeth that brushing cannot reach.

Residents should be encouraged to floss their teeth at least once a day, preferably at bedtime after thoroughly brushing their teeth. Unwaxed dental floss is recommended because it is more gentle. The procedure to floss teeth is the following.

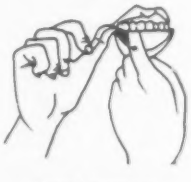
1. Wash your hands before and after flossing.
2. Work the floss between each tooth but not into the gums.
3. Have resident rinse his/her mouth thoroughly after flossing.

Study the following techniques and hand positions for flossing.



Wrap floss on middle fingers.

Thumb to outside for upper teeth.



Floss between upper back teeth.

Hold floss for lower teeth.

Floss between lower back teeth.

To determine if learners understand Flossing the Teeth, they complete the following reading comprehension exercise. The skill integrated into this job-related skill is detecting the sequence.

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READING COMPREHENSION EXERCISE

I. Place these procedures in the proper order by numbering the phrase 1, 2, or 3.

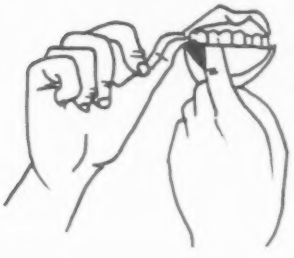
A. rinse mouth with mouthwash _____
place towel under chin _____
clean upper teeth first _____

B. assist resident to rinse mouth _____
elevate head _____
dispose of equipment _____

C. report mouth irritation to charge nurse _____
work floss between each tooth _____
rinse mouth thoroughly _____

II. Place each phrase next to the appropriate picture.

a. flossing between lower back teeth
b. flossing between upper back teeth
c. holding floss for lower teeth



_____

_____

_____

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At the end of each booklet is a final competency test which determines if CNAs have the ability to answer any question that may be asked about oral hygiene on the state examination.

ORAL HYGIENE COMPETENCY TEST

Answer true or false to the following statements.

1. Food collected under dentures causes mouth odor and gum disease. _____
2. An emesis basin is a good place to store dentures. _____
3. Flossing teeth is a process used for over fifty years. _____
4. Bone structure remains the same if dentures are not worn for several days. _____
5. Dentures are relatively inexpensive. _____
6. Dentures are a natural replacement of teeth. _____
7. Most lemon swabs contain glycerin. _____
8. Oral hygiene procedures begin and end with washing hands. _____
9. Mouthwash is a solution of water and mercury. _____
10. Clean and gently massage gums at least twice a week. _____

Circle the letter that provides the best answer to each statement.

1. The best time to brush the teeth and rinse the mouth is

   a. when a towel is placed under chin
   b. when dentures are removed
   c. before and after meals and at bedtime
   d. after glossing

2. Inspect gums regularly for

   a. food particles
   b. bleeding, sores, lesions, or irritation
   c. foul mouth odor
   d. unused toothpaste

3. Every oral care procedure begins and ends with

   a. washing hands
   b. flossing teeth
   c. removing dentures
   d. moistening lips

4. Dentures assist the resident to

   a. look better
   b. prevent mouth disease
   c. enjoy more choices of foods
   d. chew food, speak clearer, and give face normal appearance

5. Custom-made dentures are

   a. for both men and women
   b. made to fit each individual's mouth
   c. abnormally sensitive
   d. good for one's appearance

6. Upper dentures are removed by

   a. covering fingers with gloves
   b. using upward motion toward inside of mouth
   c. placing thumb on roof of mouth and two fingers on outside center of teeth
   d. clasping teeth at center portion

7. Removed dentures are stored in

   a. a cabinet over the sink
   b. a soaking solution in denture cup
   c. the bedside table
   d. the emesis basin

8. To replace dentures, if resident uses paste,

   a. wet the denture plate
   b. dry the inside plate
   c. swab the denture plate
   d. sprinkle powder on the plate

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While using the curriculum booklet, CNAs also utilize commercially produced textbooks, videos, and any other materials to strengthen basic skills or to attain a GED equivalency.

The chart below contains a list of original MCDI job-related materials and textbooks integrated into the CNA curriculum.

MCDI ORIGINAL JOB-RELATED TEXTS	BASIC SKILLS APPLICATION	COMMERCIALLY PRODUCED TEXTS
Nurses' Aide Curriculum (19 Booklets)	Reading Comprehension, Vocabulary	Barnell Loft Reading Series (13 Levels)
Activity Aide Handbook How to Use a Dictionary Spelling Summary of English Grammar	Writing, Grammar, Spelling	Graded Exercises in English (Regents) Continental Press English Series
Quality Control Series, (7 Booklets) CQI Reading Comprehension	Reading Comprehension	Barnell Loft Reading Series
Flow Sheet Instructional	Phonics, Reading Comp. ESL	Educational Development Laboratory (EDL)
Introduction to Math Series (8 Booklets)	Basic Math	Stech-Vaughn Pre-GED and GED Series Breakthrough to Algebra, Breakthrough to Geometry Learning to Compute
Original Tests: Math Diagnostic Modified Tennessee Self-Esteem	Trial Testing Instrument	TABE

INTRODUCTION TO MATH CURRICULUM

The uniqueness of the Introductory Series is that it offers clear in-depth explanations of math skills not often found in regular textbooks. The objective of the series is to simplify and explain in a concentrated manner, those areas of math that students find most challenging. The series includes:

INTRODUCTION TO THE MULTIPLICATION TABLE

The 11-page booklet helps students see the relationships in the multiplication table. To simplify the memorization process, rules and various hints are explained that make the multiplication table easy and enjoyable to learn.

INTRODUCTION TO FRACTIONS

This booklet covers all the preliminary steps needed to work more effectively with addition, subtraction, multiplication, and division of fractions. There are 17 pages on fraction terminology, identifying kinds of fractions, reducing and raising fractions, changing fractions, and lowest common denominators.

INTRODUCTION TO DECIMALS

This step-by-step explanation of the decimal system provides students with a clear view of the value of each place in the decimal line. The 15-page book also contains various exercises on reading decimals, writing decimals from words to numbers and numbers to words.

INTRODUCTION TO CONVERSIONS

A concise 10-page booklet that provides rules and exercises for the following conversions: Decimals to Percents, Percents to Decimals, Fractions to Percents, Percents to Fractions, Fractions to Decimals, and Decimals to Fractions.

INTRODUCTION TO MEASUREMENTS

All common measurements are found in this 20-page booklet: Ruler Reading, Time, Liquid, Weight, Linear, Health Thermometer, and Time Measurements. Of special importance are the conversion rules for Liquid, Weight, and Linear Measurements.

INTRODUCTION TO WORD PROBLEMS

In this text, students are given a five-step analysis on how to make word problem solving easy. There are also keywords provided that identify when to add, subtract, multiply, or divide. Formulae for solving percent word problems are a special addition to this 25-page booklet.

QUALITY ASSURANCE CURRICULUM

The Quality Improvement curriculum is an innovative, six-book series that prepares adult learners for the demands and challenges of a technological work world. With the advance of technology, workers are expected to move from traditional ways of doing business to implementing a Continuous Quality Improvement (CQI) philosophy and culture.

Although each booklet may be used separately, they contribute to a unified whole. Personal Development addresses the issue of self-esteem so essential to workplace success. Workplace Health and Safety discusses safety and health habits that decrease employer and employee health, liability, and workers' compensation costs. Problem Solving and Team Building show how to work as a team in solving problems. Quality Assurance and Total Quality Management teach ways to build a quality environment. With a basic understanding of these procedures and systems, adults in training acquire an edge on initial employment or advancement in employment.

Also available is a 16-page reading comprehension packet for each of the six Quality Assurance series. Reading skills include:
Locating the Answer, Detecting the Sequence, Following Directions, Getting the Main Idea, Drawing Conclusions, Following Directions, and Getting the Facts.

PERSONAL DEVELOPMENT
Self-Esteem
Positive Thinking
Motivation
Goal Setting

WORKPLACE HEALTH AND SAFETY
Safety Issues
Health Issues
Legal Issues

PROBLEM SOLVING
Problem Identification
Data Gathering
Data Analysis
Solution Analysis
Solution Implementation
Problem Prevention

TEAM BUILDING
Characteristics
Communication
Conflict Resolution
Team Development

QUALITY ASSURANCE
Reliability
Historical Development
Statistical Tools

TOTAL QUALITY MANAGEMENT
The Customer
Organizational Culture
Deming's 14 Points
TQM Management Style

READING COMPREHENSION SERIES

READING COMPREHENSION SKILLS

THROUGH

WORKPLACE EDUCATION

LOCATING THE ANSWER

DETECTING THE SEQUENCE

FOLLOWING DIRECTIONS

GETTING THE FACTS

USING THE CONTEXT

GETTING THE MAIN IDEA

DRAWING CONCLUSIONS

MASSACHUSETTS CAREER DEVELOPMENT INSTITUTE

140 Wilbraham Avenue
Springfield, MA 01109

ACTIVITY AIDE HANDBOOK CURRICULUM

Funded by the United States Department of Education, the Activity Aide Handbook was successfully developed, field tested, and implemented through the collaborative efforts of the Massachusetts Career Development Institute and the Geriatric Authority of Holyoke. It is now available for the benefit of other nursing homes and facilities for the aging population. The booklet is competency-based and addresses the changing role and duties of Activity Aides as a result of Omnibus Budget Reconciliation Act of 1987 (OBRA) which mandates:

"an ongoing program of activities designed to meet, in accordance with the comprehensive assessment, the interest and physical, mental and psychological well-being of each resident."

The workbook discusses and progressively builds on skills needed for the documentation process: beginning with the Initial Visit to the Resident, completing the IAA form, writing the Activity Log (Progress Notes), understanding the Care Plan and Quarterly Reports. Each chapter contains vocabulary and writing exercises to help aides practice skills.

This valuable resource, the first of its kind for Activity Aides, can be used as an educational tool to train new staff or further develop existing staff.

BOOK CONTENTS

1. CHANGING ROLE OF ACTIVITY AIDES
2. INITIAL VISIT TO RESIDENTS
3. INITIAL ACTIVITY ASSESSMENT (IAA FORM)
4. FACTORS IN DEVELOPING A CARE PLAN
5. GOALS
6. DOCUMENTATION ON GOALS

SUPPLEMENTARY MATERIALS

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NURSES' AIDE CURRICULUM

The Nurses' Aide Curriculum was successfully developed and implemented as a model program made possible by a grant from the United States Department of Education.

This competency-based curriculum can be replicated in any health care facility by integrating it with other work-related training programs, GED preparation, adult literacy or college courses.

The nineteen individual booklets may also be used to help nurses' aides pass the state's training and testing requirements and fulfill continuing education hours.

Another essential impact of the curriculum is to enhance employee job performance and productivity by

- building confidence, motivation and self esteem
- improving reading comprehension, math skills
- developing oral and written communication
- strengthening work-related decision making
- increasing opportunities for career advancement

The curriculum content aims to improve patient care through better educated health providers both within a facility and the health care industry as a whole.

BOOKLET TITLES

A. Role of the Nurses' Aide
B. Effective Communication Skills
C. Patient's Bill of Rights
Ethical and Legal Issues

D. Infection Control and Isolation Procedures
E. Safety Precautions
F. Basic Human Needs

G. Nutrition
H. Bedmaking, and Measuring Height and Weight
I. Transporting Residents

J. Vital Signs
K. Oral Hygiene
L. Nail Care, Shaving

M. Bathing, Dressing, Hair Care
N. Fluid Intake and Output
AM and PM Care
O. Elimination, Medical Terminology, Abbreviations and Vocabulary

P. Alzheimer's Disease
Q. Death and Dying
R. Stress Management
S. Employment Professionalism
Daily Resident Care Flow Sheet

TEXTBOOKS INTEGRATED WITH JOB-RELATED MATERIALS

MATHEMATICS

Learning to Compute - Holt, Rinehart, and Winston
Number Sense, Read Numbers, and Number Power - Contemporary Books
Basic Skills Series - Cambridge Adult Education
Breakthrough to Algebra and Breakthrough to Geometry - New Readers Press

WRITTEN COMMUNICATION

Power Write and A Practical Guide to Words That Work - SkillsPath Publications, Inc.

ENGLISH AS A SECOND LANGUAGE

Graded Exercises in English: Beginning, Intermediate, and Advanced - Regents
Building Word Power - Stech-Vaughn
English Lessons for Adults - Harcourt, Brace, Jovanovich

PRE-GED AND GED

How to Prepare for the High School Equivalency Examination - Contemporary Books
Cambridge Pre-Ged and GED Series - Adult Education Company
Comprehensive Review Book - Stech-Vaughn

READING COMPREHENSION AND VOCABULARY

Specific Skills Series - Barnell Loft Ltd.
Developing Reading Strategies - Stech-Vaughn
World of Vocabulary - Globe Book Company
Power Vocabulary - Regents/Prentice Hall

LANGUAGE ARTS

Mastering Good Usage - Cambridge Publishing
Beginning Lessons in English - Regents
Parts of Speech, Capitalization and Punctuation, Sentences, and Good Usage - Continental Press
Regents English Workbook Series - Regents
English Lessons for Adults - Harcourt Brace Jovanovich

SPELLING

Business Spelling and Word Power - Merrill Educational Publishing

MARKETING THE PROGRAM
ADDENDUM

Lifelong Learning Center Brochure

Program Posters

GAH Newsletter Releases

Workplace Education Reception Invitation

THE LIFELONG LEARNING CENTER

Technology has changed the nature of work. Workers are expected to know and do more, requiring higher levels of skills. The vision of the Lifelong Learning Center is to provide:

- support for the evolution of technology in the health care industry as introduced in the workplace at GAH,
- opportunities for personal growth through continuing education programs, and
- an environment that is respectful, confidential and user friendly.

EDUCATIONAL COURSES

- GED Studies
- English As A Second Language
- Math
- Computer Literacy
- CNA Enrichment
- Telephone Techniques
- College Preparation
- English Grammar/Spelling
- Reading Comprehension
- Continuous Quality Improvement
- Topics Selected by Employees

USING THE CENTER

The Lifelong Learning Center is located on the fourth floor in Room B. In this classroom, MCDI instructor, John Izzo, provides technical training in individual and group study. Classes are flexible and customized to reflect educational skills needed for personal enrichment and increased job performance.

RESOURCE LIBRARY

The center also contains a variety of educational resources that include textbooks, workbooks, pamphlets, handouts, audio/visual tapes, newspapers, individual learning kits and magazines. These materials may be checked out for a period of three weeks. Unplanned walk-ins are welcomed.

The Lifelong Learning Center and its resources are available to all GAH employees who wish to participate.

GAH EMPLOYEES

DO YOU WANT:

A BETTER PAYING JOB

A MORE SECURE JOB

ENHANCED PERFORMANCE ON THE JOB

CAREER ADVANCEMENT OPPORTUNITIES

Prepare yourself by enrolling in a training program which will enable you to be more successful on the job. For more information, contact Donna Topping, 536-8110, ext. 306

GERIATRIC AUTHORITY OF HOLYOKE - WORKPLACE EDUCATION

* CLASSES IN ADULT BASIC EDUCATION
* CLASSES IN ENGLISH AS A SECOND LANGUAGE
* CLASSES IN GED PREPARATION
* JOB RELATED SKILLS AND VOCABULARY
* CLASSES AVAILABLE TO ALL SHIFTS
* INDIVIDUALIZED PROGRAMS FOR EACH STUDENT
* COUNSELORS AVAILABLE

GAH NEWSLETTER RELEASES

We are very pleased to announce that we have been granted another year of participation in the Workplace Education Program being run at the GAH facility by MCDI. This award by the Federal Government recognizes the value of this service and the unique opportunity that it provides staff.

Don't miss the boat! This program is for everyone, regardless of your current educational level. It can help you improve your job performance, your personal life and expectations. The program is tailored to meet your personal needs. Stop at the classroom on B-4 to see John Izzo if you have any questions.

****

If you have a friend who can't read this article, take five minutes to talk with him or her about the value of the program. If you want to go back to high school, college, nursing school, or graduate school, this program is just what you need.

****

At 2:00 P.M. on May 21, an open house and recognition ceremony will be held at the Geriatric Authority of Holyoke. Twelve employees will be honored for their completion of a Workplace Education Program conducted by the Massachusetts Career Development Institute. More than 80 employees of GAH have participated in the program funded by a grant from the U.S. Department of Education.

The purpose of the program is to improve the academic abilities and self-esteem of the participants; thereby, enhancing their opportunities for career mobility, promotional advancement, and earning power.

WORKPLACE EDUCATION RECEPTION

On May 21, a reception was held to honor the employees listed below for their participation in the Workplace Education Program. Speakers included Frank Gulluni from MCDI, Ed Brunelle from GAH, and Mayor Hamilton. Each and every participant deserves our support, praise, and congratulations.

ROSE ABSOUS
SHEILA BEAUCHEMIN
MARION GIBSON
MARIE GORCKI
JANET GOTTSMAN
SCOTT MILKIEWICZ
JACQUELINE O'MALLEY
SHARON PARKS
MOSES RODRIGUEZ
SEVERO SANTANA
MATILDA REYES
BRENDA REYES
CARMEN SANTIAGO
JOHN SMITH
LISSIE VASQUEZ
VIRGINIA YOUNG-ST. PIERRE
SHERRI BIGLO
JOANNE DORE
DEBORAH PERKINS
MARYANN BEYETTE
LAURA DEROSIER
VERONICA GADOUA
JANETTE HOLMES
FACQUELINE SAEZ
MARIA VEGA

EVALUATION PROCESS ADDENDUM

Nurses' Aide Checklist

Workplace Education Employee Evaluation

Supervisor Evaluation Form

Post-Evaluation for Nurses' Aide

Trainee Evaluation Data Form

Graduation Invitation

Graduation Diploma

NURSES' AIDE CHECKLIST

NAME

TITLE	Workbook	Readings	Videos	TITLE	Workbook	Readings	Videos
ROLE OF NURSES' AIDE				ORAL HYGIENE			
EFFECTIVE COMMUNICATION SKILLS				NAIL CARE, SHAVING			
PATIENT'S BILL OF RIGHTS ETHICAL AND LEGAL ISSUES				BATHING, DRESSING HAIR CARE			
INFECTION CONTROL ISOLATION PROCEDURES				FLUID INTAKE & OUTPUT AM AND PM CARE			
SAFETY PRECAUTIONS				ELIMINATION TERMINOLOGY, ABBREVIATIONS AND VOCABULARY			
BASIC HUMAN NEEDS				ALZHEIMER'S DISEASE			
NUTRITION				DEATH AND DYING			
BEDDING MEASURING HEIGHT & WEIGHT				STRESS MANAGEMENT			
TRANSPORTING RESIDENTS				EMPLOYMENT PROFESSIONALISM DAILY RESIDENT CARE FLOW SHEET			
VITAL SIGNS							

INSTRUCTOR COMMENTS

WORKPLACE EDUCATION EMPLOYEE EVALUATION

1. Overall, how would you rate your educational program on a scale of 1 to 10?

   (Ten is the highest value.) _____

2. What did you find most helpful?

   _____

   _____

   _____

3. What did you find least helpful?

   _____

   _____

   _____

4. What would you <u>ADD</u> to improve the course?

   _____

   _____

   _____

5. Any additional comments?

   _____

   _____

   _____

   _____

Thank you.

NATIONAL WORKPLACE EDUCATION PROGRAM
MASSACHUSETTS CAREER DEVELOPMENT INSTITUTE
in partnership with
GERIATRIC AUTHORITY OF HOLYOKE, MA
UNITED FOOD AND COMMERCIAL WORKERS UNION, Local 1459

SUPERVISOR EVALUATION FORM

NAME_____ DATE_____

CLASS SCHEDULE_____ DEPT/UNIT_____

Directions: Circle the appropriate number in response to the questions below. The number 1 represents the low end of the scale.

QUESTIONS	SCALE
1. Has the worker improved in following verbal directions?	1 2 3 4 5
2. Has the worker improved in understanding verbal directions?	1 2 3 4 5
3. Has the worker's attendance improved?	1 2 3 4 5
4. Has the worker's written work improved?	1 2 3 4 5
5. Has the worker's productivity increased?	1 2 3 4 5
6. Has the quality of the worker's productivity increased?	1 2 3 4 5

ADDITIONAL COMMENTS

MASSACHUSETTS CAREER DEVELOPMENT INSTITUTE

GERIATRIC AUTHORITY OF HOLYOKE

UNITED FOOD AND COMMERCIAL WORKERS UNION, LOCAL 1459

WORKPLACE EDUCATION PROGRAM

POST-EVALUATION

for

NURSES' AIDES

140 Wilbraham Avenue
Springfield, MA 01109
(413) 781-5640

I GENERAL LEARNING

A. VERBAL ABILITY - WORD MEANIINGS

DIRECTIONS: In each of the sentences below, one word is capitalized. From the four words or phrases that follow, circle the word that most nearly corresponds with the capitalized word.

1. The implementation of the medical treatment plan was given SCANT consideration.

   a. enormous
   b. fervid
   c. little
   d. clothed

2. The key speaker in his lengthy presentation SCOFFED at the current health care debate.

   a. explained
   b. amplified
   c. supported
   d. mocked

3. A SIMULATED exercise was conducted by the nurses.

   a. pretended
   b. superficial
   c. stimulating
   d. simultaneous

4. The IRRITANT was found to be in the products that were being used.

   a. fluid
   b. inflammatory
   c. explanation
   d. aggregate

5. The health care provision in the law was RESCINDED by the courts.

   a. complicated
   b. accepted
   c. modified
   d. revoked

6. The book was written to EMBODY all aspects of care for the elderly.

   a. combat
   b. eliminate
   c. abjure
   d. incorporate

7. To MANIFEST interest in working within a health care facility means:

   a. to conceal
   b. to diminish
   c. to display
   d. to augment

8. If something is DEBILITATING to patients, it is:

a. invigorating
b. stimulating
c. tolerable
d. weakening

9. A LACKADAISICAL attitude:

a. enthusiastic
b. complacent
c. profound
d. indifferent

10. The RECOMMENDATION from the doctor was for further treatment.

a. conclusion
b. advice
c. decision
d. explanation

B. VERBAL ABILITY - ANALOGIES

DIRECTIONS: In the following statements, compare the relationship between the first pair of capitalized words. Circle the word choice that shares a similar relationship with the third capitalized word.

1. EAR is to HEAR as EYE is to:

a. table
b. hand
c. foot
d. see

2. SHOE is to FOOT as HAT is to:

a. coat
b. nose
c. head
d. collar

3. WATER is to DRINK as BREAD is to:

a. cake
b. coffee
c. eat
d. pie

4. FOOD is to HUMANS as GASOLINE is to:

a. gas
b. oil
c. spark
d. auto

5. EAT is to FAT as STARVE is to:

a. thin
b. food
c. bread
d. thirst

6. HOUR is to MINUTE as MINUTE is to:

a. hour
b. week
c. second
d. short

7. JANUARY is to FEBRUARY as JUNE is to:

a. July
b. May
c. month
d. year

8. ABOVE is to BELOW as TOP is to:

a. spin
b. bottom
c. surface
d. side

9. PUPIL is to TEACHER as CHILD is to:

a. parent
b. dolly
c. youngster
d. obey

10. SUCCESS is to JOY as FAILURE is to:

a. sadness
b. success
c. fail
d. work

C. READING COMPREHENSION

DIRECTIONS: Read each passage below. Answer the question regarding what is stated or implied in the passage. While more than one answer seems appropriate, there is ONLY ONE BEST ANSWER FOR EACH QUESTION.

I Many patterns of nursing care are being used today. In the FUNCTIONAL method of organizing care, each nursing employee is assigned specific duties to be carried out on all patients in a given unit. For example, a nurses' aide might be assigned to take all the patients' temperatures and the practical nurse to take all the patients' blood pressures.

When TEAM NURSING is used, a professional nurse acts as the leader and assigns the team members (other professional nurses, practical nurses, aides, and orderlies) to patients according to their capabilities.

In PRIMARY NURSING, the nurse is responsible for planning and caring for patients until they leave the hospital. One of the advantages of this pattern is that the nurse is able to give more individualized care.

PROGRESSIVE patient care groups the patients according to degree of illness, including the patients on the following units: intensive care, intermediate care, self care, long-term care, and home care.

When the SPECIALIZED care pattern is used, the patients are grouped according to age or diagnoses. Examples include, orthopedics, pediatrics, obstetrics, or geriatrics. Nursing care patterns are constantly being modified in an effort to improve the quality of care.

1. An appropriate title for the above passage is

   a. How Nurses Care for Their Patients
   b. Advantages and Disadvantages of Nursing Care Patterns
   c. Nursing Care Patterns
   d. The Modification of Nursing Care Patterns

2. When team nursing is practiced, the person who plans for and delegates care is the

   a. head nurse
   b. primary nurse
   c. supervisor
   d. team leader

3. The nursing care pattern that assigns specific tasks, such as administration of medicine to individual nurses, is called

   a. total patient care
   b. functional
   c. progressive patient care
   d. primary nursing

4. Placing critically ill patients in the intensive care unit is an example of

   a. progressive patient care
   b. functional nursing
   c. team nursing
   d. primary nursing

II The term philanthropy is defined as a spirit of good will toward humanity, usually expressed in activities that promote human welfare. In ancient societies, there existed self-supporting groups. Urbanization resulted in these groups disbanding. Subsequently, all the principal religions began to realize the need for financially wealthy people to aid the less fortunate. In recognition of this need, they encouraged their parishioners to donate generously to the poor.

During the Middle Ages in Europe, orphanages and hospitals were supported by the rich and by church collections. As the modern nation surfaced, governments assumed the duties of religious authorities as the basic philanthropic agencies.

Today, philanthropy is synonymous with the disbursement of wealth by individuals and the fund-raising activities of nonprofit organization such as United Way. One of the most famous philanthropists was the American industrialist, Andrew Carnegie. He devoted years to giving away the huge fortune he had acquired in the steel industry. In keeping with the principles he proposed in his essay, "Gospel of Wealth," Carnegie turned over $300 million to society. Significant philanthropic foundations of the twentieth century were also established by others like John D. Rockefeller.

The Rockefeller Foundation promotes the "well-being" of humankind throughout the world. The nonprofit organization is based on a perception of a need in medical education, public health, medical and biological research, agriculture, the social sciences, and humanities. The Foundation gives aid through grants to qualified agencies and to the training of personnel in related fields.

5. In ancient times, philanthropic activities shifted from family circles to the church because

   a. the church could appropriate more funds
   b. the church demanded it
   c. there were more people in need
   d. people moved to towns and villages

6. According to this passage, a philanthropist could be considered

   a. profoundly religious
   b. a humanitarian
   c. political
   d. an industrialist

7. Andrew Carnegie's great wealth may be attributed to his

   a. essay writing
   b. foundations and trusts
   c. investment and return in the steel industry
   d. prudent attitude toward life

8. The "Gospel of Wealth" advocates that the

a. prosperous give back to society
b. the rich should get richer
c. the church assumes responsibility for the impoverished
d. government should oversee philanthropic organizations

9. As delineated in this passage, the grant provisions to the Rockefeller Foundation

a. would permit aid to local sports program
b. would affirm assistance to medical research
c. would assist other philanthropic organizations
d. would provide assistance to any destitute individual

10. An appropriate title for this passage would be

a. The Rockefeller Foundation
b. Sharing the Wealth
c. Alms to the Poor
d. Philanthropy in Ancient Times

D. PROBLEM SOLVING ABILITY - APPLIED MATH

DIRECTIONS: Read the following problem questions and circle the correct answer.

1. There are 40 patients on an Alzheimer's nursing care unit. Three-fourths of them are women. How many men are in this unit?

a. 15
b. 12
c. 10
d. 16

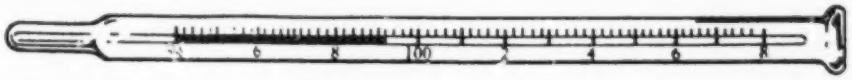
2. A patient receives two fifths from $10.00 in change for cable TV. How much change does the patient receive?

a. $2.00
b. $4.00
c. $5.00
d. $3.00

3. A nursing student received two grades of 90 and two grades of 80 in her tests for the course. The grades were all weighed equally. What is the student's average for the course?

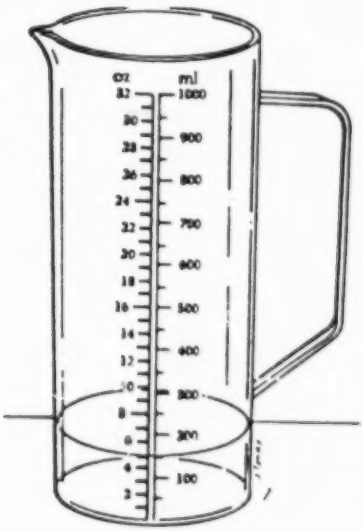
a. 90
b. 87
c. 85
d. 84

4. What is the correct reading of the temperature on this Fahrenheit thermometer?



a. 85.1
b. 98.6
c. 99.2
d. 85.4

5. How many milliliters of urine are in this container?



a. 5
b. 300
c. 150
d. 310

6. If a patient's height is sixty seven inches, what is the height recorded in feet and inches?

a. six feet, seven inches
b. four feet, seven inches
c. six feet, one inch
d. five feet, seven inches

7. A radial pulse is taken for 30 seconds. The number of beats is 34. What is the correct recorded radial pulse BPM?

a. 34
b. 64
c. 68
d. 60

8. The nursing assistant takes and records the blood pressure of four patients. Which of the following is considered normal?

a. 98/54 mm Hg
b. 210/100 mm Hg
c. 130/82 mm Hg
d. 162/90 mm Hg

9. Mrs. Johnson drank one fourth of a 32 ounce container of low fat milk. How many ounces did she drink?

a. four
b. eight
c. six
d. five

10. If there are 300 residents in the health care facility and three fifths of them are in regular units or programs, how many are in specialized units or programs?

a. 180
b. 120
c. 160
d. 140

II. APPLIED WORKPLACE KNOWLEDGE
NURSES' AIDE, NURSING ASSISTANT, LONG-TERM CARE ASSISTANTS, HOME HEALTH AIDES

DIRECTIONS: Carefully read each statement and circle the best answer.

1. The following statements are about resident or patient records. Which statement is false?

a. The record is used to communicate information about the patient/resident.
b. The record is a written account of the patient/resident's condition and response to treatment.
c. The record is a written account of care given by the health team.
d. Anyone working in the facility or with the patient can read the record.

2. Where does the nurse describe the nursing care given?

a. nursing care plan
b. nurse's notes
c. flow sheet
d. kardex

3. The nursing care plan

a. is written by the physician
b. consists of actions which nursing personnel take to help the patient/resident
c. is the same for all patients/residents
d. is also called the kardex

4. A patient or resident's urine sugar and acetone are measured four times a day. They are then recorded

a. on the admission sheet
b. in the diabetic flow sheet
c. in the nursing care plan
d. in the nurse's notes

5. Oral hygiene is part of

a. AM care and PM care
b. morning care
c. care given after lunch
d. all of the above

6. What is NOT the purpose of bathing?

a. increasing circulation
b. promoting drying of the skin
c. exercising body parts
d. refreshing and relaxing the patient

7. Soaps do all the following except

a. remove dirt and dead skin
b. remove pathogens
c. remove skin oil and perspiration
d. dry the skin

8. Bath water for a complete bed bath should be

a. 100 degrees F
b. 105 degrees F
c. 110 degrees F
d. 120 degrees F

9. Which does not prevent decubiti?

a. repositioning every two hours
b. applying lotion to dry areas
c. scrubbing and rubbing the skin
d. keeping bed linens clean, dry, and free of wrinkles

10. Which are not used to treat decubiti?

a. Stryker frame and Clinitron bed
b. water bed and flotation pad
c. plastic sheet and waterproof pad
d. heel and elbow protectors

11. Which of the following statements is false?

a. Regular elimination means that a person must have a bowel movement every day.
b. Stools are normally brown, soft, and formed.
c. Diarrhea occurs when feces move through the intestines rapidly.
d. Constipation results when feces move through the large intestine slowly.

12. Bowel elimination is affected by

a. privacy and age
b. medications and diet
c. fluid intake and activity
d. all of the above

13. Which measure will not promote comfort and safety in relation to bowel elimination?

a. asking visitors to leave
b. assisting the patient/resident to assume a sitting position
c. offering the bedpan after meals
d. telling the patient/resident you will return very soon

14. Nutrition is

a. fats, proteins, carbohydrates, vitamins, and minerals
b. the process of ingestion, digestion, absorption, and the use of foods and fluids by the body
c. the four basic food groups
d. the balance between fluids taken in and lost by the body

15. If a resident/patient with diabetes does not eat breakfast, you should

a. tell the charge nurse or supervisor
b. offer a mid-morning snack
c. wait to see if lunch is eaten
d. call the family

16. A tube that goes through the nose and into the stomach is

a. nosogastric
b. gastrostomy
c. intravenous infusion
d. hyperalimentation

17. Sodium restricted diets are usually ordered for all of the following, except those with

a. diabetes mellitus
b. heart disease
c. kidney disease
d. liver disease

18. The Heimlich Maneuver should be used if a resident is

a. confused
b. choking
c. vomiting
d. diabetic

19. During meals, a patient/resident chokes and cannot speak. The aide or assistant should

a. notify the charge nurse
b. perform the Heimlich Maneuver
c. slap the person on the back
d. suction the patient/resident

20. Which foods provide the most protein?

a. butter and cream
b. tomatoes and potatoes
c. meats and fish
d. corn and lettuce

21. Which of the following statements is false?

a. The vital signs are temperature, pulse, respiration, and blood pressure
b. Vital signs detect changes in normal body function
c. Vital signs change only when a person is ill
d. Sleep, exercise, medications, emotions, and noise can affect vital signs

22. To take an oral temperature, place the thermometer

a. under the tongue
b. in the rectum
c. under the armpit
d. on the leg

23. The most common artery used to take a pulse is

a. radial
b. carotid
c. temporal
d. brachial

24. The normal pulse rate for adult women is

a. 50-60 beats per minute
b. 75-90 beats per minute
c. 60-70 beats per minute
d. 65-80 beats per minute

25. Which of the following pulse rates should be reproted to the nurse?

a. over 90 and under 75 bpm
b. over 100 and under 60 bpm
c. over 80 and under 65 bpm
d. over 90 and under 70 bpm

26. Normal respiration is

a. between 12 and 24 per minute
b. quiet and effortless
c. regular, with both sides of the chest rising and falling equally
d. all of the above

27. Diastolic pressure is

a. pressure at contracture
b. pressure when heart is pumping
c. pressure when heart is at rest
d. pressure when heart is functioning normally

28. Systolic pressure is

a. pressure when the heart is pumping
b. pressure when the heart is at rest
c. pressure when the heart is functioning normally
d. the anterior blood pressure

29. A resident/patient has hypertension. Treatment will probably include all of the following except

a. no smoking and exercise
b. a high sodium diet
c. a low calorie diet if obese
d. medication to lower blood pressure

30. A resident has congestive heart failure. The following measures have been ordered. Which one should you question?

a. force fluids
b. measure intake and output
c. measure weight daily
d. perform range of motion exercises

31. The bedding on a surgical bed is

a. untucked and draped
b. tucked
c. untucked and fanfolded on the side
d. made with a toepleat

32. A patient/resident has lost five pounds in a week. The nurses' aide should

a. call the family
b. order extra food
c. provide more snacks
d. tell the charge nurse

33. A primary right of a terminally ill patient is to

a. receive extraordinary care
b. be treated with dignity and care
c. receive lots of visitors
d. be left alone often

34. When talking with a confused patient/resident, it is best to

a. repeat over and over until understood
b. not ask any questions
c. raise your voice when speaking
d. use a calm consistent approach

35. The first person to take out of the building in case of fire is

a. an ambulatory person
b. those who are bedbound
c. a person who is blind or deaf
d. wheel chair patients/residents

36. a restraint is only used

a. to help the nursing staff
b. when ordered by a physician
c. for a person who is blind or deaf
d. to protect the nursing staff

37. You see a co-worker steal supplies or resident's belongings and fail to report it. You are guilty of

a. malpractice
b. gossip
c. aiding a crime
d. disloyalty

38. Which of the following is not a part of the Patient's Bill of Rights?

a. the right to be informed of medical costs
b. the right to send and receive unopened personal mail
c. the right to a schedule for meals
d. the right not to perform work without consent

39. For residents/patients who are depressed, the BEST thing to do is

a. arrange for a priest, minister, or rabbi to visit
b. force them to talk with you
c. turn on the television
d. introduce them to other residents/patients or staff

40. A nurses' aide brings a food tray and notices that a bed patient/resident has been incontinent. The aide should

a. serve the tray
b. tell the charge nurse
c. clean and change the patient/resident
d. tell the patient/resident to be more careful

III. APPLIED WORKPLACE PERFORMANCE

DEMONSTRATED SKILLS ABILITIES

DIRECTIONS: Each student is required to demonstrate his/her ability to perform real or simulated tasks. The supervisor is to rate the sequence, time, and manner in which the task is performed by circling the appropriate number.

RATINGS	5 OUTSTANDING	2 FAIR
	4 GOOD	1 NEEDS IMPROVEMENT
	3 SATISFACTORY	

1. The complete sequence of making a surgical or resident's occupied or unoccupied bed._____

2. The appropriate instruction, administration, reading, and accurate recording of height, weight, and oral temperature. _____

3. The appropriate instruction, administration, reading, and recording of blood pressure. _____

4. The appropriate performance of the Heimlich Maneuver. _____

5. Transferring a patient from bed to wheelchair with or without assistance of lift. _____

6. Serving a tray to a patient with special instructions. _____

MASSACHUSETTS CAREER DEVELOPMENT INSTITUTE
WORKPLACE EDUCATION PROJECT

EMPLOYEE EVALUATION DATA
NOVEMBER 1, 1996 TO OCTOBER 31, 1997

EMPLOYEE NAME: AGE: SEX:

MARITAL STATUS: RACE: Hispanic Black White
Asian Other_____

NUMBER OF DEPENDENT CHILDREN: ____

COUNTRY OF ORIGIN: USA Asia-Pacific Islands Central America South America

Europe Other (Please Identify) _____

YEARS IN THE UNITED STATES: _____

YEARS OF EDUCATION: Fewer than 4 4-6 years 7-9 years 12 years or more

MCDI EDUCATION PROGRAM: JRC ABE ESL GED Other_____

STARTING DATE: _____ END DATE: _____ HOURS OF INSTRUCTION
Completed _____hours

CHARACTERISTICS OF EMPLOYEE'S JOB:

Job Title: _____ Hourly Wage: _____

Department: _____ Part-Time or Full-Time:_____

How Long in Job: Fewer than 6 Months 6-12 Months 1-2 Years

2-5 Years 5+ Years

EDUCATION: PRE-TEST POST-TEST

READING:
WRITING:
MATH:

DIPLOMA or CERTIFICATION PASSED FAILED NOT TAKEN

GED:
NURSES' AIDE EXAM:

EMPLOYEE SATISFACTION WITH WORK PERFORMANCE:

EXCEPTIONALLY SATISFIED	VERY SATISFIED	SATISFIED	SOMEWHAT SATISFIED	NOT SATISFIED
5	4	3	2	1

IF EMPLOYEE DID NOT COMPLETE PROGRAM, WHAT IS HE/SHE DOING NOW:

OTHER EMPLOYEE EVALUATIONS ATTACHED. (please indicate)

PRE-TEST POST-TEST

SELF-CONCEPT SCALE:
EMPLOYEE PERFORMANCE EVALUATION:
EMPLOYEE EVALUATION:

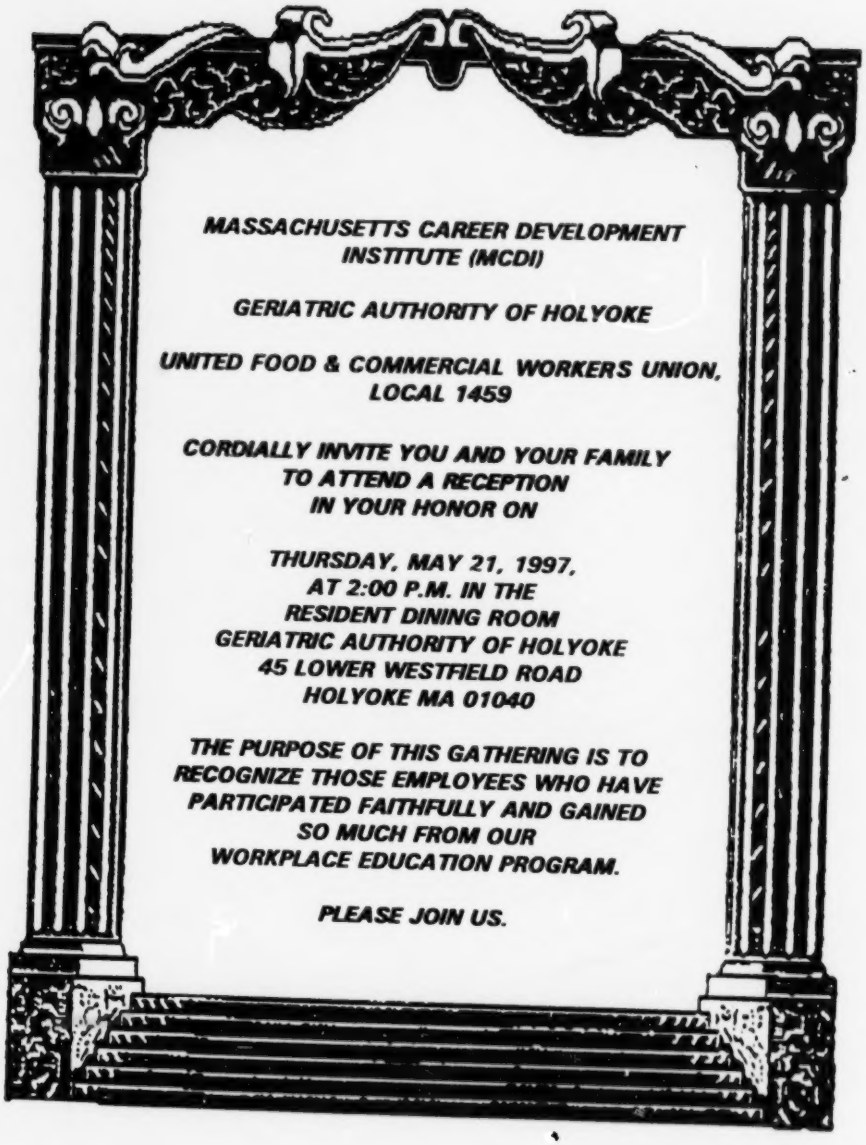
ATTENTION AND RETENTION:

TOTAL # OF DAYS_____ WEEKS_____ IN PROGRAM
TOTAL # OF DAYS IN ATTENDANCE: _____
TOTAL # OF DAYS ABSENT: _____

EMPLOYEE: RETAINED _____ NOT RETAINED_____

PROMOTED_____ OTHER _____

PLEASE INDICATE:



MASSACHUSETTS CAREER DEVELOPMENT INSTITUTE (MCDI)

GERIATRIC AUTHORITY OF HOLYOKE

UNITED FOOD & COMMERCIAL WORKERS UNION, LOCAL 1459

CORDIALLY INVITE YOU AND YOUR FAMILY TO ATTEND A RECEPTION IN YOUR HONOR ON

THURSDAY, MAY 21, 1997, AT 2:00 P.M. IN THE RESIDENT DINING ROOM GERIATRIC AUTHORITY OF HOLYOKE 45 LOWER WESTFIELD ROAD HOLYOKE MA 01040

THE PURPOSE OF THIS GATHERING IS TO RECOGNIZE THOSE EMPLOYEES WHO HAVE PARTICIPATED FAITHFULLY AND GAINED SO MUCH FROM OUR WORKPLACE EDUCATION PROGRAM.

PLEASE JOIN US.

BEST COPY AVAILABLE

MASSACHUSETTS CAREER DEVELOPMENT INSTITUTE
GERIATRIC AUTHORITY OF HOLYOKE
UNITED FOOD AND COMMERCIAL WORKERS UNION, Local 1459

Award This Certificate
for

SUCCESSFUL COMPLETION
OF
THE WORKPLACE EDUCATION PROGRAM
to

Patricia Camerota

Date *Director*

148

130

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STAFF DEVELOPMENT
ADDENDUM

THE CHALLENGE OF STAFF DEVELOPMENT

One of the goals of the partnership among the Geriatric Authority of Holyoke, the Massachusetts Career Development Institute, and the United Food and Commercial Workers Union was to develop a successful model of workplace education that can be replicated locally or in other areas of the country. This text entitled, Principles and Guidelines to Design and Implement a Workplace Education Program, is the fulfillment of that goal.

The first section of the text provides concise explanations on each of the eight components that comprise a workplace education program. The second section of the text, the addendum, includes numerous samples of brochures, tests, curricula summaries, forms, evaluation instruments, and needs assessment tools that can be adapted and replicated in any type of business/agency desiring to initiate a program or strengthen one that already exists. The final diagram on the next page outlines the eight components of a Workplace Education Program and their corresponding addendum inclusions.

The success of any Workplace Education Program depends on the depth of receptivity and enthusiasm by persons responsible for its implementation. The purpose of this text is to simplify that challenge while maintaining the high level of professionalism that workplace education deserves.

WORKPLACE EDUCATION	a. Workplace Education Brochure b. Workplace Education Process and How it Works
PARTNERSHIP TEAM	a. MCDI Brochure b. GAH Brochure c. UFCW Brochure d. Building the Partnership Team Form e. Partnership Team Forms: Attendance Agenda and Partnership Team Meeting Notes
NEEDS ASSESSMENT PROCESS	a. Employee Basic Skills Needs Assessment b. Employer Needs Assessment Interview Questions c. Math Diagnostic Test d. Modified Tennessee Self-Concept Survey e. Nurses' Aide Workplace Assessment Competency
PROGRAM GOALS	a. Specific Program Goals
CURRICULUM DESIGN	a. Curriculum Development Process: A Practical Application b. Introduction to Math Curriculum c. Quality Assurance Curriculum with Reading Comprehension Skills d. Activity Aide Handbook Curriculum e. Nurses' Aide Curriculum f. Basic Education Textbook Integration with Job-Related Materials
MARKETING THE PROGRAM	a. Lifelong Learning Center Brochure b. Program Posters c. GAH News Releases d. Workplace Education Reception Invitation
EVALUATION PROCESS	a. Nurses' Aide Checklist b. Workplace Education Employee Evaluation c. Supervisor Evaluation Form d. Post-Evaluation for Nurses' Aide e. Trainee Evaluation Data Form f. Graduation Invitation g. Graduation Diploma
STAFF DEVELOPMENT	a. The Challenge of Staff Development

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